

# **EXHIBIT 2**

1 IN THE UNITED STATES DISTRICT COURT  
2 DISTRICT OF NEW JERSEY  
3 MDL NO. 16-2738 (MAS)(RLS)

IN RE: JOHNSON & JOHNSON  
4 TALCUM POWDER PRODUCTS  
MARKETING, SALES PRACTICES  
5 AND PRODUCTS LIABILITY  
LITIGATION

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1	MS. PARFITT: Michelle Parfitt and			
2	Chris Tisi are here on behalf of the			
3	plaintiff steering committee along with			
4	Patrick Lyons from my office.			
5	Richard, would you like to			
6	introduce yourself.			
7	MR. GOLOMB: Yes. Richard Golomb			
8	for the state court plaintiffs.			
9	MS. DAVIDSON: Hi, Richard.			
10	Michelle and Chris and Patrick, are			
11	you all in the same room as			
12	Dr. Siemiatycki?			
13	MS. PARFITT: We are not. Chris			
14	and I are here with Dr. Siemiatycki.			
15	Patrick is in his own office.			
16	MS. DAVIDSON: Got it. And are you			
17	going to go on the camera?			
18	MS. PARFITT: Yes, I'm happy to.			
19	Sure.			
20	MS. DAVIDSON: Usually we're all on			
21	the camera.			
22	MS. PARFITT: No problem. No			
23	problem.			
24	MS. DAVIDSON: I want to see your			
25	pretty face.			

<p>1 like this to remember what's the left and 2 what's the right. 3 MS. PARFITT: Okay. All right. 4 Fair enough. Thank you. I appreciate 5 that everyone. 6 MS. DAVIDSON: Okay. Are you ready 7 to get started? 8 MS. PARFITT: Please. Thank you. 9 EXAMINATION 10 BY MS. DAVIDSON: 11 Q. Good morning, Dr. Siemiatycki. 12 A. Good morning, Ms. Davidson. 13 Q. Did I pronounce your name more Or 14 less correctly? 15 A. You did a very good job. 16 Q. Okay. Great. 17 Did you bring any materials with 18 you to the deposition today? 19 A. Oh, I brought some binders of all 20 of the material that was in my bibliography and 21 my written report. And a few scattered 22 articles that hadn't been in the binders but 23 that I wanted to have around, and I -- I have a 24 few -- there are a few articles that I printed 25 that I think are in the binders as well; so</p>	<p>Page 10</p> <p>1 BY MS. DAVIDSON: 2 Q. Dr. Siemiatycki -- 3 MS. PARFITT: Yes. 4 MS. DAVIDSON: Okay. 5 BY MS. DAVIDSON: 6 Q. Dr. Siemiatycki, do you have notes 7 on any of these documents? 8 A. I have scribbles on some -- some of 9 the articles and some of the documents. 10 Q. Okay. 11 A. I don't have standalone handwritten 12 documents of any sort or commentaries. 13 MS. DAVIDSON: Michelle, we'd like 14 to have those scribbles produced. I think 15 we're still waiting also for the 16 Clarke-Pearson ones that we had asked for 17 at the end of his deposition. 18 So if you could get those both to 19 us together, that would be great. 20 MS. PARFITT: I will make a note -- 21 I will make a note of that, Jessica, 22 absolutely. What we'll do after the 23 deposition is, if you don't mind when I 24 get back, take them with me and we'll have 25 copies made in DC and send them off to</p>
<p>1 they are duplicate copies. 2 Otherwise, I have a copy -- copies 3 of my report, including a version that 4 compares -- sort of a compared documents with 5 the previous version of my report. 6 Q. I'm sorry. I'm not sure I 7 understand what you're saying. 8 MS. PARFITT: Jessica, may I help 9 on that? 10 MS. DAVIDSON: That would be great. 11 MS. PARFITT: Okay. What he has is 12 another report, which would be the date 13 November 15, '23; but what it does, it 14 highlights -- blue or red, I'm not sure 15 what color. It highlights the changes 16 from his earlier report of June 30th, '21. 17 So what it does it -- 18 MS. DAVIDSON: It's a redline that 19 you prepared for him? 20 MS. PARFITT: Yes, yes. 21 MS. DAVIDSON: But it's a 22 computer-generated redline not like a 23 handwritten -- 24 MS. PARFITT: Oh, no, no, no. 25</p>	<p>Page 11</p> <p>1 you. 2 MS. DAVIDSON: Great. 3 BY MS. DAVIDSON: 4 Q. Dr. Siemiatycki, did you review 5 your prior two depositions to prepare for 6 today? 7 A. Yes. 8 Q. Is there anything you would change 9 in those two prior depositions? 10 MS. PARFITT: Objection to form. 11 THE WITNESS: No, not that I 12 recall. 13 BY MS. DAVIDSON: 14 Q. Okay. And you met with Ms. Parfitt 15 and Mr. Tisi to prepare? 16 A. I'm sorry? 17 Q. You met with Ms. Parfitt and 18 Mr. Tisi to prepare for this deposition? 19 A. We met yesterday. 20 Q. Was that the only time you met to 21 prepare for this deposition? 22 A. We -- we had a couple of Zoom 23 discussions in the last few weeks, I think 24 maybe a cumulative two hours maybe or something 25 like that of discussion mainly about the</p>

<p>1 process, but yeah.</p> <p>2 Q. You're not supposed to tell me what</p> <p>3 you talked about.</p> <p>4 So you had two meetings on Zoom and</p> <p>5 one live yesterday?</p> <p>6 A. That's my recollection at the</p> <p>7 moment, yeah.</p> <p>8 Q. And did they show you any documents</p> <p>9 that were not on your materials considered</p> <p>10 list?</p> <p>11 A. There was one --</p> <p>12 MS. PARFITT: Dr. Siemiatycki,</p> <p>13 you're not to identify what it is. The</p> <p>14 question is whether or not you were shown</p> <p>15 any documents not on your materials</p> <p>16 considered list.</p> <p>17 THE WITNESS: Yes, yes.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Okay. Do you have any documents</p> <p>20 with you today that are not on your material</p> <p>21 considered list?</p> <p>22 A. Yes.</p> <p>23 Q. What is that?</p> <p>24 A. Am I supposed to answer that</p> <p>25 question?</p>	<p>Page 14</p> <p>1 documents he reviewed, and we didn't get</p> <p>2 an updated reliance list.</p> <p>3 So if there are new documents that</p> <p>4 he's reviewed since he's submitted his</p> <p>5 report, that's all I'm asking. I'm</p> <p>6 entitled to know what they are.</p> <p>7 Dr. Siemiatycki says he has</p> <p>8 documents in front of him that aren't on</p> <p>9 his reliance list. We have to know what</p> <p>10 those are to proceed.</p> <p>11 MS. PARFITT: What he have in front</p> <p>12 of him are not the reliance materials. He</p> <p>13 has and you were provided, I believe three</p> <p>14 days ago, a Dropbox. Patrick Lyons made</p> <p>15 sure that was secured and sent to all of</p> <p>16 you, which is a Dropbox of any materials</p> <p>17 he may have considered or not, meaning</p> <p>18 considered and read them, considered and</p> <p>19 read part of them.</p> <p>20 That was made available in advance</p> <p>21 of this deposition. So what you should</p> <p>22 have is a Dropbox; and Jessica, that</p> <p>23 should have been forwarded to you.</p> <p>24 MS. DAVIDSON: All right. Let's go</p> <p>25 off the record for a minute, and let me</p>
<p>1 Q. Yes.</p> <p>2 MS. PARFITT: Jessica, what we can</p> <p>3 do -- again, there's -- there's</p> <p>4 duplicative -- I guess it's a little bit</p> <p>5 more complex. Some of the ones on his</p> <p>6 materials considered are documents that he</p> <p>7 would pull out for you right now.</p> <p>8 I think it's probably going to be</p> <p>9 very difficult for him to discern sitting</p> <p>10 here today. You can -- we can make them</p> <p>11 all available to you. There's nothing new</p> <p>12 that you haven't seen.</p> <p>13 If there is during the course of</p> <p>14 this, we can talk about it, but I'm not</p> <p>15 sure he's going to be able to discern</p> <p>16 what's in the materials considered list,</p> <p>17 part of his bibliography produced prior to</p> <p>18 in a Dropbox his '21 deposition, and those</p> <p>19 that Patrick Lyons sent to all of you in a</p> <p>20 Dropbox of materials that he's continued</p> <p>21 to review but not necessarily are reliance</p> <p>22 materials because, obviously, those</p> <p>23 opinions are contained in the '23 report.</p> <p>24 MS. DAVIDSON: I think we're</p> <p>25 entitled before we depose him to know what</p>	<p>Page 15</p> <p>1 figure this out; and I'll be back in two</p> <p>2 minutes.</p> <p>3 (Discussion held off the record.)</p> <p>4 MS. DAVIDSON: Let's go back on the</p> <p>5 record.</p> <p>6 THE WITNESS: So one is the</p> <p>7 National Cancer Institute PDQ on</p> <p>8 ovarian/fallopian tumors.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Okay. Uh-huh.</p> <p>11 A. I think that -- that was not on my</p> <p>12 list, but I'm not sure if it's in the Dropbox.</p> <p>13 And another is a report from EPA, I</p> <p>14 think, a news release from EPA called</p> <p>15 "Biden-Harris Administration Finalizes Ban on</p> <p>16 Ongoing Uses of Asbestos."</p> <p>17 MS. PARFITT: Yes, that one.</p> <p>18 THE WITNESS: This one? Yes.</p> <p>19 The report by Longo from 2023</p> <p>20 called, "Third MDL Supplemental Report."</p> <p>21 That's enough.</p> <p>22 Some of it's -- it's in the list.</p> <p>23 An article called -- by Kim, K-I-M,</p> <p>24 is the first author, Chang, Kwon, and</p> <p>25 Myong, called, "Asbestos Exposure and</p>

<p>1 Ovarian Cancer, a Meta-Analysis," 2 published in '23, 2023. 3 MS. PARFITT: You have to read this 4 into the record. 5 THE WITNESS: Oh, okay. Sorry. 6 I'm not sure which ones. 7 Davis article is -- did you see the 8 editorials in this pile? 9 MS. PARFITT: He has also the 10 Harlow, Cramer editorials to the O'Brien, 11 which again should have been -- 12 THE COURT REPORTER: I'm sorry. 13 Could you say that again? 14 He also has... 15 MS. DAVIDSON: The Gossett, the 16 Gossett editorial. 17 MS. PARFITT: That's on his list. 18 MS. DAVIDSON: Okay. 19 MS. PARFITT: But in addition to 20 that, he has the -- the Harlow, Cramer 21 editorials, letters to the editorial by 22 O'Brien as well. I don't know whether 23 they were in the '21 box or the '23 box, 24 but he has those in front of him as well. 25 MS. DAVIDSON: Okay.</p>	<p>Page 18</p> <p>1 the talc MDL litigation. 2 Does that sound about right to you? 3 A. I get -- if you got that 4 information from Ms. Parfitt, then the 5 information's correct. 6 Q. I assume you have some general 7 sense of what you've been paid in your mind. 8 Is it around \$241,000? 9 A. Yeah. I mean, we're going back a 10 few -- about three or four years or something 11 like that. Yes, I -- I think that is sounds 12 about right. 13 Q. Okay. And you also got paid for 14 state court litigation. 15 Do you know how much in total -- 16 you also were paid for your role in some state 17 court talc cases. 18 Do you know how much you have made 19 in total from talc litigation? 20 A. I'm not sure what that refers to, 21 the "state court." 22 MS. PARFITT: May -- may I help, 23 again, Jessica, to move it along? 24 MS. DAVIDSON: Sure. 25 MS. PARFITT: You testified in</p>
<p>1 THE WITNESS: The Savant article. 2 MS. PARFITT: The Savant article on 3 inflammation, he has that in front of him. 4 MS. DAVIDSON: And it's your belief 5 that these were not in the Dropbox? 6 MS. PARFITT: We'll check. 7 8 MS. DAVIDSON: We'll compare this 9 to our list. 10 MS. PARFITT: Yeah. We can do 11 that. And, Jessica, if there's a question 12 about anything, let us know. But you -- I 13 just want to keep moving forward. 14 MS. DAVIDSON: Is that all of them? 15 MS. PARFITT: Yeah. Is there 16 anything else, Doctor? 17 THE WITNESS: That's all that I can 18 identify quickly. I think that's all of 19 them; otherwise, they're a binder with 20 materials that -- 21 BY MS. DAVIDSON: 22 Q. Have been previously disclosed? 23 A. Yeah. 24 Q. Dr. Siemiatycki, according to my 25 math, you have been paid \$241,000 to date in</p>	<p>Page 19</p> <p>1 Echeverria, a state court case, and she's 2 asking -- 3 MS. DAVIDSON: And Oules. 4 MS. PARFITT: -- and Oules. Thank 5 you. 6 And she's asking whether or not you 7 have any recollection. If you do -- your 8 invoices were submitted in the past. 9 She's asking -- 10 THE WITNESS: Sorry. I -- I don't 11 recall -- I don't recall at this time. 12 BY MS. DAVIDSON: 13 Q. So you have no sense of 14 approximately how much money you have earned to 15 date in talc litigation in total? 16 A. I -- I don't have a point estimate, 17 but I guess I could give a minimum/maximum kind 18 of range. 19 Q. What's that? 20 A. I would say between 200,000 and 21 400,000. 22 Q. Well, we know you already got 241 23 from federal court, and there's two other 24 cases. 25 A. Okay.</p>

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1	Q. So it would be a lot more than 200.	1	currently have full-time employment?
2	A. I am estimating that the extra bit	2	A. I'm retired from university.
3	that you were talking about.	3	Q. When did you retire?
4	Q. Oh. So you're saying that in	4	A. 2021.
5	total, it was somewhere between 400 and --	5	Q. And other than your -- do you have
6	MS. PARFITT: No. That's not --	6	a pension?
7	BY MS. DAVIDSON:	7	A. Yes, I do.
8	Q. -- and 600?	8	Q. Other than your pension and your
9	MS. PARFITT: No.	9	talc earnings, do you have any other earnings?
10	MS. DAVIDSON: No. That is what he	10	MS. PARFITT: Objection. Form.
11	said. Michelle, don't interrupt.	11	You're not entitled to all his other
12	BY MS. DAVIDSON:	12	sources of revenue, Jessica.
13	Q. Dr. Siemiatycki, I think you were	13	MS. DAVIDSON: Well, we're trying
14	saying that was the additional.	14	to understand what percentage of his
15	So are you estimating that in	15	income is.
16	addition to 241,000, you received another	16	MS. PARFITT: He has indicated he
17	200,000?	17	can't provide that.
18	A. I mean, I wouldn't contest that,	18	MS. DAVIDSON: I understand.
19	but I -- I can't confirm it either.	19	BY MS. DAVIDSON:
20	Q. Okay. Do you have an estimate of	20	Q. But, Dr. Siemiatycki, do you have
21	how much you have earned in total from talc	21	any other source of income other than your
22	litigation?	22	pension and the talc earnings?
23	A. No.	23	MS. PARFITT: Objection. You're
24	Q. So whether it was 300, 400, 500,	24	not entitled to other forms of his income.
25	you don't know?	25	MS. DAVIDSON: I'm not asking for
	Page 23		Page 25
1	A. Right now, no. I mean, I -- I	1	the amounts.
2	would have to look it up.	2	BY MS. DAVIDSON:
3	Q. What percentage of your income has	3	Q. You can answer the question.
4	talc litigation been over the last several	4	MS. PARFITT: You just asked for
5	years?	5	it. I object to him divulging other forms
6	A. I have to do some arithmetic and	6	of income. You're not entitled to that.
7	estimate what my total revenue income has been.	7	It's irrelevant.
8	So we're going back to 2015, so near eight or	8	THE WITNESS: If I'm not obliged to
9	nine years; is that right? 2016, I think.	9	divulge all of my sources of income, then
10	So I'd have to figure out what is	10	I'd prefer not to.
11	my total income and then what the talc part of	11	BY MS. DAVIDSON:
12	it would be. It -- it would take me more than	12	Q. Dr. Siemiatycki, is your pension
13	a couple of minutes to do that.	13	and your talc earnings the bulk of your income
14	Q. So you can't tell me, sitting here	14	for the last several years?
15	today, what percentage of your income this 400	15	MS. PARFITT: Objection. Form.
16	or so thousand dollars would have been?	16	THE WITNESS: I guess it's part of
17	MS. PARFITT: Objection. Asked and	17	the same answer.
18	answered.	18	BY MS. DAVIDSON:
19	THE WITNESS: No, I can't. Not --	19	Q. You are -- that is a legitimate
20	not sitting here this moment. I could if	20	question, Doctor. You can't choose what to
21	I took time. I could take 15 or	21	answer and what not to answer today, with all
22	20 minutes, go off the record maybe, or	22	due respect.
23	whatever what you like.	23	Is your pension and your talc
24	BY MS. DAVIDSON:	24	earnings the majority of your income over the
25	Q. Are you currently -- are you	25	last several of years?

<p style="text-align: right;">Page 26</p> <p>1 A. By "majority, "you mean 50 percent 2 or what?</p> <p>3 Q. Well, let's start with 50 percent. 4 Is your pension and your talc 5 earnings more than 50 percent of your earnings 6 in the last several years?</p> <p>7 MS. PARFITT: Objection.</p> <p>8 THE WITNESS: Yes.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Is it more than 75?</p> <p>11 MS. PARFITT: Objection.</p> <p>12 THE WITNESS: I -- yes.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. And despite the fact that your talc 15 earnings are such a substantial portion of your 16 income, you can't remember sitting here today 17 how much you've earned from the talc 18 litigation?</p> <p>19 MS. PARFITT: Objection. Asked and 20 answered.</p> <p>21 Let's move on, Jessica. I think 22 you've got your answers.</p> <p>23 THE WITNESS: No.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. Are you retained in any other</p>	<p style="text-align: right;">Page 28</p> <p>1 MS. PARFITT: Objection. The 2 question -- you're entitled to ask whether 3 he's been retained as an expert in a case, 4 and he's answered.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Have you served in some other role 7 in litigation other than being an expert?</p> <p>8 MS. PARFITT: Objection.</p> <p>9 THE WITNESS: I'm not sure if I 10 should answer.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. Yes, you should answer it. The 13 objection's are for the record.</p> <p>14 MS. PARFITT: The objection is: 15 You are entitled to get information about 16 where he has been retained as an expert. 17 That's it.</p> <p>18 If someone's talked to him, if 19 someone's consulted with him, you're not 20 entitled to that.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Okay. I'm not asking for 23 consulting.</p> <p>24 I'm asking if you have been 25 retained in litigation in some other capacity</p>
<p style="text-align: right;">Page 27</p> <p>1 litigation at the time -- at the current time?</p> <p>2 MS. PARFITT: As an expert?</p> <p>3 THE WITNESS: As an expert, you 4 mean? No.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Have you been retained as an expert 7 in any other litigation since 2021?</p> <p>8 A. There was a Canadian case, but I 9 think that was before 2021. I think that was 10 mentioned in my report, and I don't remember 11 what the date was.</p> <p>12 Q. What did that case involve?</p> <p>13 A. It's a similar case. It's a 14 litigation on behalf of women with ovarian 15 cancer in Canada.</p> <p>16 Q. Right. I'm asking have you been 17 retained in any litigation other than talc in 18 the last several years?</p> <p>19 A. Oh, other than talc. Not -- I -- 20 I've --</p> <p>21 MS. PARFITT: As an expert.</p> <p>22 THE WITNESS: As an expert, no.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Have you been retained in another 25 capacity in litigation?</p>	<p style="text-align: right;">Page 29</p> <p>1 other than as an expert.</p> <p>2 A. Only as consultant or --</p> <p>3 Q. Okay.</p> <p>4 A. -- exploring possibility of 5 participation in cases.</p> <p>6 Q. But none of that ended up in your 7 being disclosed as an expert?</p> <p>8 A. No, not since 2021, I don't think.</p> <p>9 Q. Okay. And do you still do any work 10 at McGill or University of Montreal?</p> <p>11 A. I do some work. I still have 12 students in the -- sort of going through to the 13 Ph.D. I still do research and publish and 14 acknowledge my university affiliations when I 15 do that, but I don't -- I don't have a presence 16 on campus.</p> <p>17 Q. Now, were you an adjunct, or -- 18 were you an adjunct professor at McGill and 19 University of Montreal?</p> <p>20 A. I was a full professor at 21 University of Montreal --</p> <p>22 Q. Oh, okay.</p> <p>23 A. -- and a adjunct professor at 24 McGill University.</p> <p>25 Q. Got it. So your -- your pension</p>

<p>1 comes from University of Montreal, not McGill? 2 A. Yes. 3 Q. Got it. Okay. 4 Have you authored any publications 5 concerning talc and ovarian cancer since 6 September 2021? 7 A. No. 8 Q. Are you a coauthor on a paper 9 called Leung? 10 A. Called what? 11 Q. L-E-U-N-G? 12 A. Oh, yeah. Lisa Leung, yeah. 13 Q. Was that published in September 14 2021? 15 A. I'd have to look that up. 16 Q. That's okay. If you don't know, 17 that's fine? 18 A. Yeah. If you have it on my CV as 19 September '21, then that's correct. 20 Q. Did you disclose in that paper that 21 you are plaintiff's expert in the talc 22 litigation? 23 A. I don't recall -- 24 MS. PARFITT: Let's get the paper 25 in front of him.</p>	<p style="text-align: right;">Page 30</p> <p>1 A. I don't recall. 2 Q. Did you have a policy of disclosing 3 in any papers related to talc that you are an 4 expert for plaintiffs in this litigation? 5 A. I am not sure what you mean by 6 "have a policy." I don't have any sort of 7 strictly written, notarized policy, but I do 8 disclose and I would disclose in any 9 publications that concern talc and 10 carcinogenicity that I am -- I have been an 11 expert in litigation. 12 Q. Do you know, sitting here today, 13 why the Leung paper does not include such a 14 disclosure? 15 A. I'd have to look at the article, 16 see what it was about, and see what the -- 17 whether it was relevant to disclose that. 18 Q. Have you published your views -- 19 other than the Leung paper, have you written 20 anything about talc or asbestos since September 21 2021? 22 A. I don't recall now. I'd have to 23 look at my CV. 24 Q. Have you made any public statements 25 concerning talc and ovarian cancer since 2021?</p> <p style="text-align: right;">Page 32</p>
<p>1 THE WITNESS: Yeah. Let -- yes. 2 Let me get the -- 3 BY MS. DAVIDSON: 4 Q. Do you recall whether -- 5 MS. DAVIDSON: Michelle, this is my 6 deposition. 7 BY MS. DAVIDSON: 8 Q. Dr. Siemiatycki, do you recall 9 whether you disclosed in that paper that you 10 are plaintiff's expert in the talc litigation? 11 A. No. I -- 12 MS. PARFITT: He can answer the 13 question when he has the article in front 14 of him. 15 MS. DAVIDSON: I asked if he 16 recalls. He doesn't need the paper for 17 that, Michelle. 18 Michelle, I have four hours here 19 today. Please don't interrupt this 20 deposition, or I'll have to go to the 21 Court and ask for more hours. 22 BY MS. DAVIDSON: 23 Q. Dr. Siemiatycki, do you recall 24 whether you disclosed that you are an expert in 25 the talc litigation in that paper?</p>	<p style="text-align: right;">Page 31</p> <p>1 A. I don't recall; but again, looking 2 at my CV might refresh my memory about 3 something, but I don't think I did. 4 Q. Are you currently working on any 5 articles or studies pertaining to talc or 6 ovarian cancer? 7 A. Well, there is an intention to 8 write -- to do an analysis of perineal talc 9 exposure in the context of a case control study 10 that my colleague has carried out in Montreal, 11 and I would be involved in that article. So 12 it -- there's an intention for that to happen. 13 It's not currently ongoing yet. 14 Q. I'm sorry. I don't understand. 15 You have an intention to publish a 16 new case control study on talc and ovarian 17 cancer? 18 A. Yes. 19 Q. And has the research begun on that? 20 A. Has the research what? 21 Q. Begun on that? 22 A. The research began ten years ago, 23 so this is a study that was carried out by my 24 colleague, Anita Koushik, as the principal 25 investigator. I was at the time involved as</p> <p style="text-align: right;">Page 33</p>

<p>1 kind of mentor in helping her get funding and 2 designing the study and designing the fieldwork 3 procedures. 4 And the questionnaire that she 5 developed included questions about perineal 6 talc exposure, and the intention -- her 7 intention was always to do an analysis of that 8 data and publish it. 9 Q. Do you know why it hasn't yet been 10 published? 11 A. Well -- 12 MS. PARFITT: Objection. Form. 13 THE WITNESS: -- she had other 14 priorities that were, in part, driven by 15 the principal hypotheses of stated in her 16 grant application and the funding agency. 17 And those were sort of in chronological 18 priority list. 19 It started probably around 2017 or 20 '18 that the data became available to be 21 analyzed. It takes -- of course, a study 22 that was funded around 2008 or '9, didn't 23 complete the fieldwork and collection of 24 data probably for about five years after 25 that.</p>	<p>Page 34 1 know how -- it'll -- whether it'll be accepted 2 in first iteration or, you know, three 3 iterations of comments from editors and 4 reviewers and so on and so forth. 5 So when it's going to come out is 6 not under the control of the authors and the 7 investigators. You can control when you're 8 going to submit the paper for -- to a journal. 9 Given that the analyses have not 10 yet been carried out, unless she has started 11 without my knowledge in the last couple of 12 months, and that the writing of the manuscript 13 has not started, I guess it wouldn't happen 14 before manuscript wouldn't be ready for 15 submission before the fall of this year. 16 Q. Have you seen the data yet? 17 MS. PARFITT: Seen what? 18 MS. DAVIDSON: The data. 19 THE WITNESS: No, not on talc 20 exposure. 21 BY MS. DAVIDSON: 22 Q. Okay. Have you done any outreach 23 to any health organizations, any public health 24 organizations about talc use and ovarian cancer 25 since 2021?</p>
<p>1 And then getting started with 2 analyses and drafting of papers depended 3 on her priorities and the interests of her 4 students who were the, typically, the 5 first authors of the eventual paper. 6 So she has now -- they have now 7 published -- I don't know -- four or five 8 papers, I think, that have come out of 9 that study. They haven't yet published 10 anything about perineal talc exposure, and 11 my understanding is that that is coming 12 up. I don't know if it's next on the list 13 or -- she's also recently moved from one 14 university to another and had disruptions 15 of that sort in her life. 16 BY MS. DAVIDSON: 17 Q. When is -- when is the last time 18 you discussed this paper -- potential paper 19 with her? 20 A. A couple of months ago, I would 21 say. Maybe December or January. 22 Q. And when do you expect it to come 23 out? 24 A. To come out? You never know when a 25 paper is going to come out because you never</p>	<p>Page 35 Page 34 1 A. Well, I -- I had reached out to 2 Health Canada when they put out a call for or 3 opinions and input on their proposed report, 4 but I -- it might have been before 2021 or in 5 2020 or something in that ballpark. 6 Q. Since Health Canada, my question 7 is: Have you reached out to any public health 8 organizations about talc use and ovarian 9 cancer? 10 A. Any public health organization? 11 No. It's -- it's not my practice 12 to reach out to public health organizations 13 about research issues. 14 Q. Are you familiar with an 15 organization called ACOG? 16 A. I'm familiar with it. I'm not a 17 member of it, and I haven't participated in any 18 way. 19 Q. Do you know whether they list talc 20 use as a risk factor for ovarian cancer? 21 A. No, I don't. 22 Q. Have you looked on their website 23 since 2021? 24 A. No, I haven't. 25 Q. Are you familiar with the Society</p>

<p style="text-align: right;">Page 38</p> <p>1 of Obstetricians and Gynecologists of Canada, 2 also known as SOGC? 3 A. No, I'm not familiar with it. 4 Q. You've never heard of SOGC? 5 MS. PARFITT: Objection. 6 THE WITNESS: Nope. 7 MS. PARFITT: Asked and answered. 8 THE WITNESS: With all the acronyms 9 that fly around my desk and my brain, it 10 doesn't ring a bell. It's not the top of 11 mind. I don't know if I've -- 12 BY MS. DAVIDSON: 13 Q. I gave it to you without the 14 acronym, actually: Society of Obstetricians 15 and Gynecologists of Canada. 16 A. I'm sure there is such a society. 17 So if you're asking me whether I'm surprised 18 that there is such a thing, no, I'm not at all 19 surprised. I would expect that there would be. 20 But I'm not familiar with it. I've 21 never been in touch with them. I've never read 22 any documents from them. It wouldn't be a 23 go-to place for me to find out about research 24 or risk factors. 25 Q. And you've never reached out to</p>	<p>1 website to see if they list talc as a risk 2 factor for ovarian cancer? 3 A. No, I haven't. 4 Q. So you're not aware that the CDC 5 does not identify talc as a risk factor for 6 ovarian cancer? 7 MS. PARFITT: Objection. Form. 8 THE WITNESS: No. I'm not aware of 9 what's on their website. 10 BY MS. DAVIDSON: 11 Q. Are you familiar with the American 12 Cancer Society? 13 A. Yes, I am. 14 Q. Are you aware that the American 15 Cancer Society has stated that the weight of 16 the evidence does not support an association 17 between ovarian cancer and general exposure to 18 talc-based powder? 19 MS. PARFITT: Objection. Form. 20 THE WITNESS: I am not aware of 21 that statement that you just read. 22 BY MS. DAVIDSON: 23 Q. Do you disagree with the American 24 Cancer Society? 25 MS. PARFITT: Objection. Form.</p>
<p style="text-align: right;">Page 39</p> <p>1 them to express your concerns about talc and 2 ovarian cancer, correct? 3 A. Correct. 4 Q. Are you familiar with the Society 5 of Gynecological Oncology in the United States, 6 also known as SGO? 7 A. Again, I'm -- I'm -- you know, I'm 8 not familiar with the particular combinations 9 of words that go into their name and the 10 acronym; but I am certain there is such a 11 society. 12 Q. That wasn't my question. 13 Doctor, you mentioned that you had 14 the NCI PDQ in front of you. 15 Have you ever reached out to NCI to 16 raise your concerns about talc and ovarian 17 cancer? 18 A. No, I haven't. 19 Q. Have you ever heard of the CDC? 20 A. Yes, I have. 21 Q. And have you ever reached out to 22 the CDC to express your concerns about talc and 23 ovarian cancer? 24 A. No, I haven't. 25 Q. Have you ever looked on the CDC</p>	<p style="text-align: right;">Page 41</p> <p>1 You may answer. 2 THE WITNESS: I would have to see 3 the entirety of their document and 4 their -- whatever they -- whatever they 5 include in their document to support that 6 conclusion before commenting on whether I 7 agree or disagree. 8 BY MS. DAVIDSON: 9 Q. So you might agree with their 10 statement -- is there a possibility that you 11 would agree with the statement that, "The 12 weight of the evidence does not support an 13 association between ovarian cancer and genital 14 exposure"?</p> <p>15 MS. PARFITT: Objection. Form. 16 THE WITNESS: I would find it most 17 unlikely that I would disagree with it, 18 but I am open to being persuaded by 19 evidence. And if they have evidence that 20 I've never seen... 21 BY MS. DAVIDSON: 22 Q. Who drafted the changes to your 23 2023 report? 24 A. I'm sorry? 25 Q. Who drafted the additions in your</p>

<p>1 2023 report?</p> <p>2 A. The additions?</p> <p>3 Q. Uh-huh.</p> <p>4 A. What -- which additions are you --</p> <p>5 Q. Do you remember you have a redline</p> <p>6 in front of that shows what was added in '23?</p> <p>7 Who drafted those additions?</p> <p>8 A. So just to be clear, there are not</p> <p>9 additions to the 2023 report. There were</p> <p>10 changes to the 2021 report, and that's what is</p> <p>11 redlined in sort of the correction in the</p> <p>12 version that -- that I have.</p> <p>13 Who drafted them? I did.</p> <p>14 Q. Did you identify all the documents</p> <p>15 that have been added to your reliance list and</p> <p>16 put in the Dropbox and mentioned today, or were</p> <p>17 some of them provided to you by the lawyers?</p> <p>18 A. Some were provided by the lawyers,</p> <p>19 and some I found independently. And at this</p> <p>20 time I -- I mean, I've never kept a tally of</p> <p>21 how I found out about different documents or</p> <p>22 reports. So I couldn't really identify which</p> <p>23 ones I came upon and which ones were sent to me</p> <p>24 by the lawyers; but some were sent by the</p> <p>25 lawyers, and some I came upon independently.</p>	Page 42	Page 44
<p>1 Q. You testified in 2021 that you're</p> <p>2 not offering an opinion that Johnson's Baby</p> <p>3 Powder contained asbestos.</p> <p>4 Is that still your position?</p> <p>5 MS. PARFITT: Objection. Form.</p> <p>6 Misstates his testimony.</p> <p>7 THE WITNESS: I would say that I've</p> <p>8 seen more evidence in the last couple of</p> <p>9 years that point in the direction that</p> <p>10 asbestos has been in the -- in the</p> <p>11 formulations of cosmetic talc.</p> <p>12 And so I would be much more</p> <p>13 amenable to the opinion that there has</p> <p>14 been asbestos.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. You would be more amenable to that</p> <p>17 opinion, or you're offering that opinion?</p> <p>18 A. I'm offering that opinion but based</p> <p>19 not on my own expertise as a mineralogist or a</p> <p>20 measurement scientist for asbestos, but the</p> <p>21 accumulation of evidence from credible sources,</p> <p>22 including EPA, FDA in the U.S. and some</p> <p>23 scientists who have measured asbestos fibers in</p> <p>24 talc, in historic talc preparations, make me --</p> <p>25 persuade me much more.</p>	Page 43	Page 45

<p style="text-align: right;">Page 46</p> <p>1 MS. PARFITT: You're not going to 2 get more --</p> <p>3 MS. DAVIDSON: You're interrupting 4 me. You're interrupting me.</p> <p>5 Dr. Siemiatycki is answering simple 6 questions --</p> <p>7 MS. PARFITT: Let me finish.</p> <p>8 MS. DAVIDSON: You can finish after 9 I'm finished. You will finish after I am 10 finished.</p> <p>11 Dr. Siemiatycki is answering very 12 simple questions with long-winded answers 13 that he was clearly coached to do, and we 14 have very limited time.</p> <p>15 MS. PARFITT: Jessica --</p> <p>16 MS. DAVIDSON: So --</p> <p>17 MS. PARFITT: -- you do not give 18 your tenor to what Dr. Siemiatycki. He's 19 here to answer your questions. Make the 20 question so he can give a good answer.</p> <p>21 And, Jack, if you need look to look 22 at the articles, just tell Ms. Davidson.</p> <p>23 THE WITNESS: Thank you.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. Dr. Siemiatycki, other than EPA and</p>	<p style="text-align: right;">Page 48</p> <p>1 just talking generally.</p> <p>2 MS. DAVIDSON: I'm just telling you 3 it's a new sentence in his report.</p> <p>4 MS. PARFITT: Fair enough.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Dr. Siemiatycki, sitting here 7 today, can you recall any other documents that 8 you relied on for your opinion, which is 9 uncited in your report, that there is "growing 10 evidence that talc products may have contained 11 asbestos fibers"?</p> <p>12 MS. PARFITT: Objection. Misstates 13 his testimony.</p> <p>14 THE WITNESS: I am trying to 15 recall, and right now I can't recall 16 those. I'd have to spend a couple of 17 minutes looking through the documents.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Okay. Dr. Siemiatycki, would you 20 agree with me that it's important for a 21 scientist before reaching any sort of opinions 22 on scientific issues, to consider all the 23 relevant data?</p> <p>24 A. Yes.</p> <p>25 Q. Dr. Siemiatycki, have you reviewed</p>
<p style="text-align: right;">Page 47</p> <p>1 FDA, what other materials are you relying on 2 for your new opinion that Johnson's Baby Powder 3 contains asbestos?</p> <p>4 A. A document written by Dr. Longo, 5 William Longo, November 17, 2023, which 6 included analyses of talc products, historic 7 talc products of various origins, including 8 Chinese and that -- where he demonstrated the 9 presence of asbestos fibers.</p> <p>10 Q. Are there any other documents 11 you're relying on?</p> <p>12 A. Well, historically, there were 13 reports from Blount about this, relying on my 14 memory. Let me look in my report and see.</p> <p>15 Q. Your report doesn't actually cite 16 anything. When you say -- when you refer to, 17 quote, "Growing evidence that talc products may 18 have contained asbestos fibers," there's no 19 cite there?</p> <p>20 MS. PARFITT: Jessica, I'll also 21 remind you that this area was covered in 22 his prior deposition.</p> <p>23 MS. DAVIDSON: It's a new sentence 24 in his report, Michelle.</p> <p>25 MS. PARFITT: I understand. I'm</p>	<p style="text-align: right;">Page 49</p> <p>1 all the documents that J&amp;J produced in this 2 litigation about its robust testing of talc for 3 asbestos?</p> <p>4 MS. PARFITT: Objection. Form.</p> <p>5 THE WITNESS: And I'm not sure what 6 you mean by "all the documents that J&amp;J 7 produced." What's that --</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. Have you reviewed all of J&amp;J's 10 documents in which they address the robust 11 testing program for asbestos in its talc 12 products?</p> <p>13 MS. PARFITT: Objection.</p> <p>14 I'll give you a little foundation, 15 but this area was examined as well back on 16 January 31st, '19.</p> <p>17 MS. DAVIDSON: We have this new 18 statement in the report, Michelle; and 19 please stop filibustering this deposition.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Dr. Siemiatycki, do you --</p> <p>22 MS. PARFITT: Stop going back in 23 history, or we will have to call the 24 judge.</p> <p>25 MS. DAVIDSON: Michelle. Michelle,</p>

<p style="text-align: right;">Page 50</p> <p>1 it's been four years. He has an opinion.      2 I need to know --      3 MS. PARFITT: Jessica, don't      4 shriek.      5 BY MS. DAVIDSON:      6 Q. Dr. Siemiatycki, I'm going to ask      7 the question again.      8 Have you reviewed the documents      9 produced by J&amp;J addressing its robust testing      10 program for talc products?      11 MS. PARFITT: Objection.      12 THE WITNESS: I remember reviewing      13 some documents from J&amp;J about this, but I      14 don't know that this is -- was a      15 comprehensive list of documents. I mean,      16 if you -- if there are any new ones, I'd      17 be glad to look at them.      18 BY MS. DAVIDSON:      19 Q. Are you aware that J&amp;J produced      20 thousands of documents in this litigation about      21 its testing of talc for asbestos?      22 MS. PARFITT: Objection. Asked and      23 answered in his deposition January '19.      24 THE WITNESS: I'm aware they      25 produced documents about this. I don't</p>	<p style="text-align: right;">Page 52</p> <p>1 November 17th, 2023, report, Jessica?      2 We need the record to be clear.      3 BY MS. DAVIDSON:      4 Q. Dr. Siemiatycki, have you reviewed      5 any reports by Mr. Matthew Sanchez?      6 A. By who?      7 Q. Mr. Matthew Sanchez.      8 A. That does not ring a bell.      9 What would the date be on that      10 report?      11 Q. There would be multiple such      12 reports.      13 A. Roughly beginning when and ending      14 when?      15 These are from 2023 and --      16 Q. There -- over the years there have      17 been multiple reports by Mr. Matthew Sanchez.      18 Have you reviewed any of them?      19 A. I can't recall having reviewed      20 them.      21 Q. None of them -- none of them are      22 with you here today, correct?      23 A. Correct.      24 MS. DAVIDSON: Okay. I need to go      25 off the record. I have a quick call, so</p>
<p style="text-align: right;">Page 51</p> <p>1 know if -- there were thousands. I have      2 no idea how many, and I don't know what      3 they were total.      4 BY MS. DAVIDSON:      5 Q. Have you reviewed the expert report      6 of J&amp;J's expert who responds to Dr. Longo and      7 explains the flaws in Dr. Longo's testing?      8 A. Who would the author be of that      9 report or the timing?      10 Q. Do you recall reading any such      11 report?      12 A. I recall reading reports from a --      13 reports from experts for J&amp;J about this, but I      14 don't know if it's the one -- the reports that      15 you have in mind. I don't know.      16 Q. Have you reviewed the expert report      17 from J&amp;J's microscopist?      18 A. I have not recently, but I have.      19 Q. Did you review the report that      20 J&amp;J's microscopist submitted in response to the      21 Longo report you mentioned a few minutes ago?      22 MS. PARFITT: You're talking about      23 the '23 Longo report, for clarity because      24 there's two or many actually?      25 Are you referring to the</p>	<p style="text-align: right;">Page 53</p> <p>1 let's take a five-minute break.      2 MS. PARFITT: Okay. Thank you.      3 (Whereupon, a break was taken.)      4 BY MS. DAVIDSON:      5 Q. Dr. Siemiatycki, other than the      6 materials that you were provided by plaintiff's      7 counsels, did you undertake any research on      8 your own regarding potential asbestos      9 contamination in Johnson's Baby Powder?      10 A. I'm not sure if I would      11 characterize it as having undertaken      12 independent research on my own; but when I was      13 reading the various documents that I did have,      14 I would sometimes look at references in those      15 documents that may -- that were not submitted      16 to me by -- by the plaintiff's lawyers.      17 But I can't remember if that      18 occurred with this topic, with the topic of      19 asbestos in talc products. But as a general      20 rule, I would explore, read a document; and      21 there may be sort of a stimulus there to look      22 at something else.      23 Q. Well, today you mentioned an EPA      24 document, an FDA document, Dr. Longo, and      25 Dr. Blount.</p>

<p>1 Fair to say all those materials 2 were provided to you by plaintiff's counsel? 3 MS. PARFITT: Objection. Form. 4 Asked and answered. 5 THE WITNESS: So the -- I think 6 originally the Blount articles -- and I'm 7 having trouble remembering all the names, 8 but there was another early article from 9 the late -- late '70s or early '80s that 10 addressed the detection of asbestos 11 particles in talc products. Those were 12 provided originally by the lawyers. 13 The FDA analyses, I'm not sure 14 whether information about that was 15 provided by the lawyers or if I saw that 16 in another report. So I'm a little bit 17 fuzzy on the historical origin of how I 18 came to know those documents. 19 BY MS. DAVIDSON: 20 Q. Was the EPA document provided to 21 you by the plaintiff's lawyers? 22 A. Yeah. So the EPA document is the 23 recent ban on asbestos, which does not, in 24 fact, concern talc. I just had a look at it 25 directly. It doesn't explicitly concern talc,</p>	<p>Page 54</p> <p>1 You may answer, Dr. Siemiatycki. 2 THE WITNESS: I -- I have read 3 references to the to the detection of 4 metals in talc products. I -- I can't 5 say. It certainly not something that I'm 6 relying upon for any opinions about talc, 7 but it's something that I have read. 8 BY MS. DAVIDSON: 9 Q. Dr. Siemiatycki, did you reach out 10 to IARC and offer yourself as a potential 11 expert on talc issues recently? 12 A. Yes, I did. 13 Q. When was that? 14 A. Probably a year ago or nine months 15 ago. It was following a call by IARC for 16 experts to volunteer to participate in a new 17 monograph evaluation of talc, and I thought I 18 might be useful to them; and I've had a long 19 association with IARC. So I -- I did offer 20 myself in that context. 21 Q. Did you tell the lawyers you were 22 going to do that? 23 A. I don't think I told them before 24 doing it. I can't remember at what point I 25 informed them about it. Maybe only after I had</p>
<p>Page 55</p> <p>1 but it concerns one of the products that has 2 been detected in talc products, one of them. 3 Q. So, in fact, the EPA document does 4 not support your new opinion that talc 5 contained asbestos, correct? 6 MS. PARFITT: Objection. Misstates 7 his testimony entirely. 8 THE WITNESS: That's correct. I 9 would say that's correct, basically. 10 BY MS. DAVIDSON: 11 Q. Okay. And the Dr. Longo documents 12 were provided to you by plaintiff's counsel as 13 well, of course? 14 A. Yeah. 15 Q. Okay. Thank you. 16 Are you offering an opinion on 17 heavy metals in this litigation? 18 A. What do you mean by "an opinion on 19 heavy metals"?</p> <p>20 Q. Are you offering an opinion that 21 talc contained -- that Johnson's Baby Powder 22 contained heavy metals? 23 MS. PARFITT: Objection to the 24 extent it's foundational. It was covered 25 in his 2019 deposition.</p>	<p>Page 57</p> <p>1 learned that IARC was not going to invite me, 2 but we didn't have a discussion about that. 3 Q. And the reason -- and the reason 4 they didn't include you is because of your 5 conflict of interest as a plaintiff's expert, 6 right? 7 A. That's right, which -- 8 Q. And -- 9 A. -- I admitted to them front and 10 center when I made my -- when I offered my 11 services. 12 Q. Did you provide plaintiffs to 13 produce to us the letter you submitted to IARC 14 with your application, so to speak? 15 A. Can you -- can you repeat that? 16 Q. Your application to IARC, was it 17 some sort of letter? 18 A. Yeah, it was a letter. And I think 19 accompanying the letter, there was a form, 20 actually, explicitly asking the applicant to 21 list any potential conflicts of interest. 22 MS. DAVIDSON: Michelle, has that 23 been produced to us because we couldn't 24 find it? 25 MS. PARFITT: It was. It was. And</p>

<p style="text-align: right;">Page 58</p> <p>1      Patrick can confirm that.</p> <p>2      MS. DAVIDSON: Okay. All right.</p> <p>3      MR. LYONS: Yeah. It's in the --</p> <p>4      it's in the Dropbox.</p> <p>5      MS. DAVIDSON: Okay.</p> <p>6      MR. LYONS: It's labeled "Letter to</p> <p>7      IARC on Monograph 136."</p> <p>8      MS. DAVIDSON: Yeah. I don't know</p> <p>9      why we didn't find that it.</p> <p>10     Noah, please find that and make</p> <p>11     sure we have it.</p> <p>12     Noah will make sure we have it</p> <p>13     before the day is over.</p> <p>14     BY MS. DAVIDSON:</p> <p>15     Q.    Okay. Dr. Siemiatycki, you're</p> <p>16     aware that Dr. Woolen found a 1.47 risk ratio</p> <p>17     for frequent talc use, right?</p> <p>18     A.    For what?</p> <p>19     Q.    Dr. Woolen found a 1.47 risk ratio</p> <p>20     between her definition of frequent talc use and</p> <p>21     the development of ovarian cancer, correct?</p> <p>22     A.    Yes, that's correct.</p> <p>23     Q.    Does that mean that if a woman used</p> <p>24     perineal talc frequently and developed ovarian</p> <p>25     cancer, 47 percent of the cause of that ovarian</p>	<p style="text-align: right;">Page 60</p> <p>1      chance of developing ovarian cancer was 1.47</p> <p>2      times greater than the risk for a non user.</p> <p>3      It can also be restated -- it can</p> <p>4      also be restated that her chance of getting</p> <p>5      ovarian cancer was 47 percent higher than for</p> <p>6      non users, but that's not an optimal way to</p> <p>7      actually present a risk ratio or a relative</p> <p>8      risk; but that is sometimes expressed that way.</p> <p>9      But not in the percentage terms</p> <p>10     that you indicated in your question.</p> <p>11     Q.    Are you aware that IARC and NCI</p> <p>12     issued a report called "Expert Consensus on</p> <p>13     Future Directions for Ovarian Cancer Research"?</p> <p>14     A.    What would be the date</p> <p>15     approximately? The year?</p> <p>16     I'm not sure what you're talking</p> <p>17     about.</p> <p>18     MS. PARFITT: And, Jessica, if you</p> <p>19     have a copy of that document, perhaps you</p> <p>20     could share it.</p> <p>21     BY MS. DAVIDSON:</p> <p>22     Q.    I'm asking if you're familiar with</p> <p>23     the document entitled "IARC and NCI Expert</p> <p>24     Consensus on Future Directions for Ovarian</p> <p>25     Cancer Research."</p>
<p style="text-align: right;">Page 59</p> <p>1      cancer would have been her talc use?</p> <p>2      MS. PARFITT: Objection. Form.</p> <p>3      THE WITNESS: Sorry. I'm -- I'm</p> <p>4      not following your algebra.</p> <p>5      BY MS. DAVIDSON:</p> <p>6      Q.    Well, I'm asking you if that</p> <p>7      makes -- I'm asking you.</p> <p>8      A.    Yes. I understand, but I don't</p> <p>9      understand what your asking me.</p> <p>10     Q.    I'm asking you if somebody is a</p> <p>11     frequent user of talc and then develops ovarian</p> <p>12     cancer, can the risk ratio in Woolen be turned</p> <p>13     into an absolute risk such that you can say</p> <p>14     that 47 percent of this woman's cancer</p> <p>15     causation relates to ex- -- perineal talc</p> <p>16     exposure?</p> <p>17     MS. PARFITT: Objection to form.</p> <p>18     THE WITNESS: No.</p> <p>19     BY MS. DAVIDSON:</p> <p>20     Q.    And why is that?</p> <p>21     A.    Because that's not the meaning of</p> <p>22     relative risk.</p> <p>23     Q.    Can you explain?</p> <p>24     A.    The relative risk of 1.47 means</p> <p>25     that for a woman who was a frequent user, her</p>	<p style="text-align: right;">Page 61</p> <p>1      A.    What year approximately?</p> <p>2      MS. DAVIDSON: Noah, what year is</p> <p>3      it?</p> <p>4      MR. EPSTEIN: 2021.</p> <p>5      MS. DAVIDSON: 2021.</p> <p>6      MR. EPSTEIN: Do you want me to put</p> <p>7      it in the chat?</p> <p>8      MS. DAVIDSON: Not right now.</p> <p>9      MS. PARFITT: Oh, so you don't want</p> <p>10     to put it in the chat; so you don't want</p> <p>11     the doctor to --</p> <p>12     MS. DAVIDSON: I just want to know</p> <p>13     if Dr. Siemiatycki is familiar with this</p> <p>14     document, if he read it before, if it</p> <p>15     sounds familiar.</p> <p>16     THE WITNESS: No, I haven't seen</p> <p>17     it.</p> <p>18     BY MS. DAVIDSON:</p> <p>19     Q.    Okay. Thank you.</p> <p>20     How would you extrapolate from</p> <p>21     these epi studies to determine what a women's</p> <p>22     absolute risk is for ovarian cancer from</p> <p>23     perineal talc use?</p> <p>24     MS. PARFITT: Objection. Form.</p> <p>25     You can answer.</p>

<p>1           THE WITNESS: You mean technically, 2       like the algebraic formula that is used to 3       do that?</p> <p>4 BY MS. DAVIDSON:</p> <p>5       Q. How is it done?</p> <p>6       I'm just asking generally how it's 7       done.</p> <p>8       MS. PARFITT: Objection.</p> <p>9       THE WITNESS: Well, it's sort of a 10      combination of the relative risk and the 11      incidence of the disease in the 12      population. Combining those parameters, 13      you can -- you can figure out the absolute 14      risk due to the exposure.</p> <p>15 BY MS. DAVIDSON:</p> <p>16       Q. Have you done that for talc and 17       ovarian cancer?</p> <p>18       A. No, I haven't.</p> <p>19       Q. Have you done a systematic review 20      of the literature related to asbestos and 21      ovarian cancer?</p> <p>22       A. Have I personally done one?</p> <p>23       Q. Yes.</p> <p>24       A. No, I haven't.</p> <p>25       Q. Do you know how much exposure to</p>	<p style="text-align: center;">Page 62</p> <p>1       not -- I'm not aware.</p> <p>2 BY MS. DAVIDSON:</p> <p>3       Q. Were you aware that the --</p> <p>4       MS. PARFITT: Let him finish.</p> <p>5       THE WITNESS: Maybe -- maybe if you 6       tell me who the senior author is.</p> <p>7 BY MS. DAVIDSON:</p> <p>8       Q. Okay. Are you aware that the 9       Woolen paper grew out of a meta-analysis that 10      was actually done for purposes of this 11      litigation?</p> <p>12       MS. PARFITT: Objection. Misstates 13       the evidence in the case.</p> <p>14       THE WITNESS: No, I'm not aware of 15       that.</p> <p>16 BY MS. DAVIDSON:</p> <p>17       Q. Do you know how the Woolen authors 18      chose two times a week as their definition of 19      frequent use?</p> <p>20       A. It may be mentioned in the paper.</p> <p>21       I certainly don't remember it. But 22      establishing cutpoints for continuous variables 23      has an element of arbitrariness always and you 24      typically look for -- if it's a meta-analysis, 25      which this is, you're probably looking for</p>
<p>1 asbestos is needed to cause ovarian cancer?</p> <p>2       MS. PARFITT: Objection. Form.</p> <p>3       THE WITNESS: No, I don't.</p> <p>4 BY MS. DAVIDSON:</p> <p>5       Q. Are you aware that one of the 6       authors of Woolen is a plaintiff's expert in 7       this litigation?</p> <p>8       A. Am I aware that one of the authors 9       of the Woolen paper is an expert for the 10      plaintiffs; is that what you're asking?</p> <p>11       Q. That is.</p> <p>12       A. Let me look at the article.</p> <p>13       Q. Without looking at the article, you 14      can't tell me whether one of the authors is an 15      expert?</p> <p>16       A. There are 200 articles in my piles, 17      and each one has about ten authors; and I don't 18      remember all the authors on all the papers.</p> <p>19       So --</p> <p>20       Q. You don't -- you don't recall 21      whether the Woolen paper -- whether the senior 22      author on the Woolen paper is a plaintiff's 23      expert in this litigation?</p> <p>24       MS. PARFITT: Objection.</p> <p>25       THE WITNESS: I'm not aware -- I'm</p>	<p style="text-align: center;">Page 63</p> <p>1       cutpoints that have been used by the original 2       authors of the original studies. And so you're 3       a little bit at the mercy of what has been done 4       previously, and you're also trying to look for 5       cutpoints that make sense to you as a cutpoint 6       for the parameter that you're looking for, 7       which is frequency of use.</p> <p>8       But in this particular case, I 9       don't recall.</p> <p>10       Q. Did you check -- when you reviewed 11      Woolen, did you check whether the risk ratios 12      the authors used were actually for 13      two-times-a-week use?</p> <p>14       A. Sorry. Did -- was -- did I check 15      whether --</p> <p>16       Q. Whether the risk ratios used in the 17      Woolen paper actually reflected 18      two-times-a-week use?</p> <p>19       A. No, I didn't. But coincidentally, 20      I carried out an analysis myself along the 21      lines of what's in the Woolen paper some years 22      before they did, and it's in my report. And, 23      in fact, there's a table in my report -- I 24      think it's Table 8 in my report -- which 25      describes my own meta-analysis on that topic</p>

<p style="text-align: right;">Page 66</p> <p>1 and the studies that I used that I found in the  2 literature to address the question and the  3 relative risk estimates that I used  4 independently of Woolen.</p> <p>5 As I said, I did it years before  6 they did, came out quite close to the relative  7 risk estimates that they used in their  8 analysis; and my bottom-line result came out  9 very close to theirs. I think the  10 meta-relative risk in my analysis of the high  11 frequency users was 1.39 with a confidence  12 interval that easily included the 1.47 relative  13 risk estimate in the Woolen paper.</p> <p>14 So the two analyses carried out  15 completely independently of each other,  16 basically, found the same raw material to  17 analyze, carried out the analysis in similar  18 ways and found almost exactly the same  19 bottom-line result.</p> <p>20 Q. How many of the studies overlapped  21 between the two papers?</p> <p>22 A. I'm sorry. How many?</p> <p>23 Q. How many of the studies overlapped  24 between your meta-analysis and hers?</p> <p>25 A. I didn't count them, but they</p>	<p style="text-align: right;">Page 68</p> <p>1 MS. PARFITT: Objection. Form.  2 THE WITNESS: Do I know -- right  3 now sitting here, no; but if you told me  4 of another study, I might recognize it.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. And one difference between your  7 paper and the Woolen paper is that she used  8 NHS-1 data right they used NHS-1 data, right?</p> <p>9 MS. PARFITT: Objection. Form.  10 THE WITNESS: I -- maybe. Maybe  11 that's a distinction. I used O'Brien, I  12 believe; and if they used NHS-1, then that  13 would be a difference.</p> <p>14 I did not use NHS. I used  15 O'Brien --</p> <p>16 MS. DAVIDSON: Turn to Table 1.  17 MS. PARFITT: Wait, Jessica. He's  18 finishing his statement. Let him finish.</p> <p>19 THE WITNESS: I'm just  20 confirming --</p> <p>21 MS. DAVIDSON: He's answering a  22 question I didn't ask.</p> <p>23 MS. PARFITT: Yes. Let him finish.  24 THE WITNESS: So I used -- you were  25 asking about studies that overlapped and</p>
<p style="text-align: right;">Page 67</p> <p>1 almost all do.</p> <p>2 Q. Okay.</p> <p>3 A. I think there was one --</p> <p>4 Q. Okay.</p> <p>5 MS. PARFITT: Let him finish.</p> <p>6 THE WITNESS: I think one exception  7 was that, if I remember correctly, I  8 included the Terry analysis -- the Terry  9 paper as one of the components.</p> <p>10 Sorry. I'm just verifying that  11 that is the case.</p> <p>12 Oh, no. I included the Terry  13 analysis in my Table 6, which is an  14 analogous meta-analysis, but for  15 cumulative exposure not frequency of  16 exposure.</p> <p>17 So the frequency of use, which is  18 the same parameter that Woolen used -- I  19 mean, I can list the studies, but they  20 were almost identical with the ones that  21 they used.</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. Do you know whether there have been  24 other meta-analyses that defined frequency of  25 use different than two times a week?</p>	<p style="text-align: right;">Page 69</p> <p>1 whether I used NHS data, and I'm just  2 trying to answer that question. I did not  3 use NHS.</p> <p>4 I used the superior data, which is  5 in the O'Brien study, which involved a  6 longer period of follow-up and larger  7 number of cases.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. Where did Woolen get the NHS data?</p> <p>10 A. I'm sorry?</p> <p>11 Q. Do you know where Woolen got her --</p> <p>12 where the Woolen authors got their NHS-1 data?</p> <p>13 A. Off the top, no. I could look up  14 the article and try to find it, but I -- I  15 don't recall.</p> <p>16 Q. Do you recall that they limited  17 their NHS-1 data to patent women?</p> <p>18 A. I don't recall specifically, but it  19 doesn't surprise me.</p> <p>20 Q. Can we look --</p> <p>21 MS. DAVIDSON: Noah, can you put up  22 on the screen Table 1 of Woolen, which we  23 just marked as Exhibit 1.</p> <p>24 MS. PARFITT: Let the doctor get  25 his article.</p>

	Page 70		Page 72
1	MS. DAVIDSON: I'm sorry.	1	BY MS. DAVIDSON:
2	MS. PARFITT: I've asked you to	2	Q. Do you disagree with that?
3	allow Dr. Siemiatycki to --	3	A. No. I don't -- neither agree nor
4	MS. DAVIDSON: I can't hear you for	4	disagree.
5	some reason.	5	I thought you had said before that
6	MS. PARFITT: Oh, I'm sorry. I	6	they used the NHS study, so I was confused --
7	just simply asked if he has the article.	7	I'm a little bit confused now about which
8	He has it in front of him.	8	studies they used.
9	THE WITNESS: Yeah. I have it in	9	Oh, it's the NHS component of the
10	front of me now.	10	O'Brien, apparently. That's, I think, what
11	BY MS. DAVIDSON:	11	this table is indicating that was used in --
12	Q. We're looking at Table 1.	12	whereas, I used the entire O'Brien study.
13	A. Table 1.	13	But it might be -- now that I think
14	(Whereupon, Defendant's Exhibit D1,	14	about it, it might be that the other components
15	Article entitled, "Association Between the	15	of the O'Brien study, the other cohorts did not
16	Frequent Use of Perineal Talcum Powder	16	include frequency questions in their
17	Products and Ovarian Cancer: A Systematic	17	questionnaire. I'm not quite sure. I'd have
18	Review and Meta-analysis," by Sean A.	18	to read the article to see why they included
19	Woolen, MD, MSc, et al., was marked for	19	only the NHS component.
20	identification.)	20	Q. You don't recall sitting here
21	THE WITNESS: Quality assessment	21	today?
22	table, yeah.	22	A. I'm sorry?
23	BY MS. DAVIDSON:	23	Q. Sitting here today, you don't
24	Q. Are you familiar with the	24	recall how they made that decision, correct?
25	Newcastle-Ottawa Scale?	25	A. Correct.
	Page 71		Page 73
1	A. I'm familiar with it.	1	Q. Would you agree or disagree with
2	Q. Have you used it before?	2	Woolen's decision to rate the cohort design
3	A. I'm sorry?	3	higher than the case control designs?
4	Q. Have you used it before?	4	MS. PARFITT: Objection to form.
5	A. No. I -- I don't believe that the	5	THE WITNESS: I disagree if the
6	quality of epidemiological studies can be	6	implication of the question is that they
7	summarized in these kind of mono-dimensional	7	did it because it was a cohort design. I
8	scales. So I'm skeptical about the principle,	8	would have to consider carefully all of
9	and I know that I can evaluate the quality of	9	the dimensions that go into determining
10	studies better than by using any automated	10	the validity and quality of a result.
11	tool, simplistic tool because epidemiological	11	And basically, I probably would
12	studies are extremely complicated. And you	12	disagree with it after I did look at all
13	can't predict ahead of time which dimensions	13	of that because cohort studies have a lot
14	are -- might embody fatal flaws or serious	14	of disadvantages as well as case control
15	flaws or flaws that are not serious, don't	15	studies.
16	impact the result.	16	And depending on how the Newcastle
17	But anyways, to answer your	17	Scale is weighted by people who developed
18	question, I'm familiar with the scale. I've	18	it 20 years ago and were not familiar with
19	never used it. I don't believe in it	19	these particular studies but just did it
20	particularly. I've never had occasion to use	20	in a very generic, general way, I -- my
21	it.	21	appreciation -- my understanding of these
22	Q. Which study does -- do the Woolen	22	studies is that the Nurses Health
23	authors give the highest score to?	23	certain -- National Health Study -- so I'm
24	MS. PARFITT: Objection. Form.	24	not sure what the National Health Study --
25	THE WITNESS: To the O'Brien study.	25	is that the Nurses Health Study?

<p>1        Anyways, you're asking me  2        questions. I'd have to spend a couple of  3        minutes reading the paper to answer them  4        properly because I'm a bit confused now  5        about what was -- what they included.  6 BY MS. DAVIDSON:  7        Q. Dr. Siemiatycki, what was my  8        question that you're currently answering?  9        A. I think your question was whether I  10      agree that the highest quality study was the  11      cohort study among these various studies that  12      they've listed. I think that was your  13      question, whether I agree with that.  14      Q. Please try to respond to the actual  15      questions being asked because you do remember  16      the question, but your response was not related  17      to the question.  18      Dr. Siemiatycki, if a woman is  19      not --  20      A. What -- you're saying that I  21      already responded to it and then went off  22      script or something.  23      But what -- what response did you  24      get from my first comment about it?  25      I think --</p>	<p>Page 74</p> <p>1        Q. Correct. Thank you.  2        And do you know the average age at  3        which women start using talc?  4        A. In a particular study or in  5        general?  6        Q. Have you seen any studies that  7        identify the average age when women start using  8        talc in their genital areas?  9        A. I probably have, and I don't recall  10      that particular factum; but I would guess it's  11      somewhere between the ages of 13 and 25.  12      Q. And do you know the average age at  13      which women have a tubal ligation?  14      A. I don't know that for a fact. I  15      don't know that for a fact. I could -- I could  16      guesstimate; but if you're asking me for  17      factual information, I don't know.  18      Q. Is it usually older than 15 to 25?  19      MS. PARFITT: Objection.  20      THE WITNESS: Yes.  21      MS. DAVIDSON: All right. If we  22      could turn to Table 2.  23      MS. PARFITT: For the record, the  24      Woolen article.  25      THE WITNESS: Yes. Sorry. I'm not</p>
<p>Page 75</p> <p>1        Q. Dr. Siemiatycki --  2        A. -- I explained --  3        Q. Dr. Siemiatycki, if a woman does  4        not have patent tubes at the time that she is  5        interviewed in a -- if a woman does not have  6        patent tubes at the time she's interviewed for  7        an epidemiological study, does that mean she  8        never used talc while she had patent tubes?  9        MS. PARFITT: Objection. Form.  10      THE WITNESS: Is this in relation  11      to -- is this sequitur to the question  12      that you've just been asking?  13      I don't understand that question.  14 BY MS. DAVIDSON:  15      Q. Doctor, just answer the question.  16      MS. PARFITT: I think --  17      THE WITNESS: I'm trying to  18      understand the question.  19 BY MS. DAVIDSON:  20      Q. If a woman is interviewed for  21      epidemiological study and at the time she is  22      interviewed she no longer has patent tubes,  23      does she mean she never used talc at the time  24      when she had patent tubes?  25      A. No.</p>	<p>Page 77</p> <p>1        sure if I've lost the audio.  2        MS. PARFITT: Jessica, you went out  3        completely, just so you know.  4 BY MS. DAVIDSON:  5        Q. The authors state, "We include data  6        on women with intact fallopian tubes to  7        harmonize with other publications."  8        Do you see that at the bottom of  9        Footnote 5? Doctor?  10      A. Yeah. Sorry. I'm sorry. I'm  11      reading the entire footnote.  12      Q. I'm asking you about the last  13      sentence in the footnote.  14      Do you see it?  15      MS. PARFITT: Jessica, he's reading  16      the footnote.  17      THE WITNESS: Do you want me to  18      read only -- because my answer to the last  19      sentence only will be I need to read the  20      full footnote.  21      So should I -- should we do it in  22      two steps, or should I start reading the  23      full --  24 BY MS. DAVIDSON:  25      Q. Doctor, please don't be difficult</p>

<p>1 here. We're trying to get through this      2 deposition. I'm asking you a question.      3 Do you see that the authors state,      4 "We include data on women with intact fallopian      5 tubes to harmonize with other publications"?      6 Do you see that sentence?      7 MS. PARFITT: I object to your      8 characterization of this witness being      9 difficult. That is unfair, and I      10 challenge that representation, Jessica.      11 Please move forward. Just ask the      12 questions not the commentary.      13 BY MS. DAVIDSON:      14 Q. Doctor, do you see that sentence,      15 for the third time?      16 A. I see -- I see that sentence, yes.      17 Q. Doctor, can you tell me which other      18 publications on this list in Table 2 were      19 limited to women with patent tubes, if any?      20 A. I don't know. I don't know.      21 Q. When you evaluated the Woolen      22 study, did you consider whether it was accurate      23 that including data on women with intact      24 fallopian tubes would harmonize this with other      25 publications?</p>	<p>Page 78</p> <p>1 Q. Right. But my question, Doctor,      2 was whether any of the other ten studies in      3 Table 2 limited -- were limited to women with      4 patent tubes.      5 A. I don't know. I'd have to look      6 through those studies.      7 Q. And then I asked: When you      8 reviewed this paper, did you look through the      9 studies to determine whether the other papers      10 were limited to women --      11 A. No.      12 Q. -- with patent tubes?      13 A. No, no.      14 Q. That was my question. Thank you.      15 A. Okay. The answer's no.      16 Q. Doctor, if you could look at      17 Table 2, at the -- one, two, three, four,      18 five -- and the sixth column, specification of      19 talc exposure.      20 Do you see that?      21 A. Yes, I do.      22 Q. Which of these papers -- which of      23 these -- which of these relative risks used by      24 Dr. Woolen, et al., is limited -- reflects use      25 two times per week?</p>
<p>Page 79</p> <p>1 A. Well, I have some problem with the      2 formulation of that sentence because -- maybe      3 one of your previous questions hinted at      4 this -- but I think when people talk about      5 intact fallopian tubes and patent reproductive      6 tract and related to exposure to talc, there      7 should really be an appreciation of the      8 temporal relationship between those things.      9 So for sure women who used powder      10 and were -- and then had surgery, you have to      11 understand what the temporal sequence was      12 between these events to understand if there was      13 possible exposure to talc fibers, to talc      14 particles.      15 Q. Dr. Siemiatycki, what was my      16 question?      17 A. Could we have the stenographer read      18 back the question?      19 Q. You don't recall the question?      20 A. Well, I recall the theme of the      21 question, and I recall what I was trying to      22 convey, that timing is relevant to      23 understanding whether the exposure and the      24 possibility of disease are in harmony in any      25 way.</p>	<p>Page 81</p> <p>1 A. Reflects?      2 Q. Use of two times per week.      3 A. I don't know. I'd have to go      4 through them, but some of them are expressed in      5 different units; and so they are not expressed      6 in the two-times-per-week metric that you're      7 referring to.      8 Q. Do you know whether any of these      9 papers included other risk ratios for talc use      10 that more closely approximated two times per      11 week?      12 MS. PARFITT: Objection. Form.      13 THE WITNESS: No, I don't.      14 BY MS. DAVIDSON:      15 Q. Do you know how many of the papers      16 in Table 2 were not actually limited to      17 perineal talc use?      18 A. No, I don't.      19 Q. Are you aware that several of these      20 papers offered six or seven different risk      21 ratios for different specifications of talc      22 exposure?      23 MS. PARFITT: Objection. Form.      24 THE WITNESS: I would have guessed      25 that they do. Every paper usually</p>

21 (Pages 78 - 81)

<p style="text-align: right;">Page 82</p> <p>1 provides estimates of risk according to      2 different parameterizations of the      3 exposure variable. So I'm sure that these      4 studies, most of them, would have done      5 that.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. Did you determine how Woolen chose      8 which risk ratio to use when there were      9 multiple choices in one paper?</p> <p>10 A. No, I didn't.</p> <p>11 MS. DAVIDSON: All right. Let's go      12 off the record.</p> <p>13 (Whereupon, a break was taken.)</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. All right. Let's mark as Exhibit 2      16 your Declaration of Interest that you submitted      17 to IARC.</p> <p>18 (Whereupon, Defendant's Exhibit D2,      19 Declaration of Interest for IARC/WHO      20 Experts, was marked for identification.)</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Okay. You're familiar with this      23 document?</p> <p>24 A. Yes.</p> <p>25 Q. And what's the date of it?</p>	<p>1 about it?</p> <p>2 BY MS. DAVIDSON:</p> <p>3 Q. Is it your testimony today that      4 that's accurate?</p> <p>5 A. I'm sorry?</p> <p>6 Q. Is it your testimony today that      7 what you wrote here was accurate?</p> <p>8 A. At the time that I wrote it, yes.</p> <p>9 Q. So at the time that you wrote it in      10 2023, you believed that you had stopped      11 providing paid consultation services in this      12 litigation in 2020?</p> <p>13 MS. PARFITT: Objection. Form.</p> <p>14 THE WITNESS: I think so.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. When were you deposed last in this      17 litigation, Dr. Siemiatycki?</p> <p>18 A. In 2021. Yes. Excuse me.</p> <p>19 Q. And you provided a -- did you      20 provide a supplemental expert report in 2021?</p> <p>21 A. A supplemental?</p> <p>22 Q. Did you provide an expert report in      23 2021?</p> <p>24 A. Yes. Yes, I did. Yes, I did.</p> <p>25 Q. Were you paid for that expert</p>
<p style="text-align: right;">Page 83</p> <p>1 A. It says July 28th, 2023.</p> <p>2 Q. And that's the same day on which      3 you submitted you're -- that's the same day on      4 which you submitted your letter?</p> <p>5 A. I can't say for sure. I -- if you      6 have my letter, you -- you could show me that;      7 or I could check my e-mail.</p> <p>8 Q. Were they submitted at      9 approximately the same time?</p> <p>10 A. Yes, yes.</p> <p>11 Q. Okay. Great. That's my question.</p> <p>12 A. Okay.</p> <p>13 Q. If we could go to your Statement of      14 Conflict, if you could read what you wrote      15 there because -- at the bottom.</p> <p>16 A. Yes. Okay.</p> <p>17 It says, "From 2016 to 2020      18 January, I provided paid consultation services      19 to a law firm -- to law firms that were      20 involved in litigation against companies that      21 produced or sold talcum powder products."</p> <p>22 Q. And, Dr. Siemiatycki, that's not      23 accurate, correct?</p> <p>24 MS. PARFITT: Objection. Form.</p> <p>25 THE WITNESS: What's inaccurate</p>	<p>1 report?</p> <p>2 A. Yes.</p> <p>3 Q. So, in fact --</p> <p>4 A. Okay. Yeah.</p> <p>5 Q. -- your statement of declaration is      6 inaccurate, correct?</p> <p>7 A. That's correct.</p> <p>8 Q. All right. Can we go to your      9 letter?</p> <p>10 MS. PARFITT: Do you want to put      11 that in chat. I have a copy of it but --</p> <p>12 MS. DAVIDSON: We're going to mark      13 the letter as Exhibit 3.</p> <p>14 MS. PARFITT: Okay.</p> <p>15 (Whereupon, Defendant's Exhibit D3,      16 Letter from Jack Siemiatycki to IARC re      17 Talc/Acrylonitrile Monograph 136, was      18 marked for identification.)</p> <p>19 MS. DAVIDSON: Noah, are you      20 putting it up on the screen?</p> <p>21 MR. EPSTEIN: There you go.</p> <p>22 MS. DAVIDSON: Noah, again you      23 forget --</p> <p>24 MR. EPSTEIN: I shared it in chat.</p> <p>25 MS. DAVIDSON: Can you make it</p>

22 (Pages 82 - 85)

<p>1 bigger?</p> <p>2 MS. PARFITT: Jessica, I have a</p> <p>3 copy of it.</p> <p>4 MS. DAVIDSON: I'm sorry. I can't</p> <p>5 hear you, Michelle.</p> <p>6 MS. PARFITT: I have a copy of the</p> <p>7 letter too. I'm going to put it in front</p> <p>8 of him, unless you object. It's a little</p> <p>9 bit easier to see. It's hard on the</p> <p>10 screen.</p> <p>11 MS. DAVIDSON: Okay.</p> <p>12 MS. PARFITT: It's the same as you</p> <p>13 have it on the screen.</p> <p>14 MS. DAVIDSON: I want it on the</p> <p>15 screen as well, Noah. I don't know why</p> <p>16 you pulled it down.</p> <p>17 MR. EPSTEIN: I'm -- I'm making the</p> <p>18 bigger.</p> <p>19 MS. DAVIDSON: You can just zoom.</p> <p>20 Text Asher; ask him how to do it. He</p> <p>21 knows how. I can just zoom it on my own</p> <p>22 screen if everybody else has their --</p> <p>23 MS. PARFITT: He has a paper copy</p> <p>24 too. It may good for others that are</p> <p>25 participating, but I've given him a paper</p>	<p>Page 86</p> <p>1 the future."</p> <p>2 That's inaccurate as well correct?</p> <p>3 MS. PARFITT: Objection. Form.</p> <p>4 THE WITNESS: Yes. The three-years</p> <p>5 estimate is inaccurate. The next part of</p> <p>6 the sentence is accurate. At that time I</p> <p>7 didn't anticipate future involvement.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. When did plaintiff's counsel</p> <p>10 approach you about the expert report that you</p> <p>11 submitted in the fall of 2023?</p> <p>12 A. It was a few months before --</p> <p>13 before I submitted it.</p> <p>14 Q. How many months?</p> <p>15 A. I'm sorry?</p> <p>16 Q. How many months before?</p> <p>17 A. I -- I can't remember. I -- I'd</p> <p>18 have to look for evidence in emails or</p> <p>19 something like that; but off the top of my</p> <p>20 head, I don't recall. It wasn't like six</p> <p>21 months before. It was a few -- a few months</p> <p>22 before.</p> <p>23 Q. Okay. Did you have any</p> <p>24 communications with plaintiff's counsel in this</p> <p>25 litigation between 2020 and 2023?</p>
<p>1 copy; and I'll make sure it's provided and</p> <p>2 Xeroxed.</p> <p>3 MS. DAVIDSON: Okay.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. If we could go to -- it says, "In</p> <p>6 the ensuing three years, 2016 to 2019, I</p> <p>7 contributed reports to a few court cases and</p> <p>8 was deposed by the lawyers for the defense; and</p> <p>9 in one case I testified in court," right?</p> <p>10 A. Sorry. I'm not sure where</p> <p>11 you're -- where are you reading?</p> <p>12 Q. Under legal consultation related to</p> <p>13 talc --</p> <p>14 A. Oh, yes. Yeah.</p> <p>15 Q. That -- that statement, 2016 to</p> <p>16 2019, that's inaccurate as well, correct?</p> <p>17 MS. PARFITT: Objection. Form.</p> <p>18 THE WITNESS: Yes. Yes.</p> <p>19 BY MS. DAVIDSON:</p> <p>20 Q. Okay. And if we could continue</p> <p>21 down, down to conflict of interest.</p> <p>22 A. Yes.</p> <p>23 Q. It says, "I have not been involved</p> <p>24 with talc litigation in the past three years,</p> <p>25 and I do not anticipate any such involvement in</p>	<p>Page 87</p> <p>1 A. Well, there was -- as you pointed</p> <p>2 out, the 2021, there was a deposition and the</p> <p>3 report; so yes.</p> <p>4 Q. And after you submitted -- after</p> <p>5 you were deposed in 2021, have you spoken --</p> <p>6 did you speak with any plaintiff's counsel</p> <p>7 between 2021 after you were deposed and the</p> <p>8 time when you submitted your expert report in</p> <p>9 the fall of 2023?</p> <p>10 A. I don't recall.</p> <p>11 Q. Okay. Let's move on.</p> <p>12 MS. DAVIDSON: Oh, Asher, can you</p> <p>13 put -- I'm sorry.</p> <p>14 Noah, can you put up that -- the</p> <p>15 table?</p> <p>16 MR. EPSTEIN: Which table?</p> <p>17 MS. DAVIDSON: On page -- the next</p> <p>18 page.</p> <p>19 MR. EPSTEIN: Right there at the</p> <p>20 bottom?</p> <p>21 MS. DAVIDSON: Uh-huh. It starts</p> <p>22 with Oules and Echeverria. Yes.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Dr. Siemiatycki, is this table</p> <p>25 accurate?</p>

<p>1 Let me ask a different question.      2 Is this table complete and      3 accurate?      4 A. Yeah. I'm looking at the paper      5 version that Ms. Parfitt just handed me, I      6 think.      7 Q. I'm just looking at the table      8 that's on the screen.      9 I'm asking you is this table      10 complete and accurate?      11 It's a simple question.      12 A. I understand, and I'm trying to      13 rack my memory to --      14 Q. Well, I can make it easy for you.      15 You submitted an expert report in 2021, and you      16 were deposed in 2021, correct?      17 A. Correct.      18 Q. And that's not included on this      19 table, correct?      20 A. That's correct.      21 Q. So the table is not complete and      22 accurate, correct?      23 A. That's correct.      24 Q. Thank you.      25 MS. DAVIDSON: Let's mark as</p>	Page 90	Page 92
<p>1 Exhibit 4 the Leung paper.      2 (Whereupon, Defendant's Exhibit D4,      3 Paper entitled, "Occupational environment      4 and ovarian cancer risk," by Lisa      5 Leung, et al., was marked for      6 identification.)      7 MS. DAVIDSON: Noah will put it in      8 the chat and put it on the screen.      9 MS. PARFITT: I'll hand you a copy      10 of that.      11 THE WITNESS: If you have a copy.      12 MS. DAVIDSON: I can't hear you,      13 Michelle, for some reason.      14 MS. PARFITT: Oh, that's all right.      15 I said I'm just handing him a completely      16 unedited, nothing on it, which we'll turn      17 over to you. It's a little bit easier.      18 MS. DAVIDSON: Noah, if you --      19 MR. EPSTEIN: I put it on the chat,      20 and here it is on the screen.      21 MS. DAVIDSON: Okay.      22 BY MS. DAVIDSON:      23 Q. I'm marking as Exhibit 4      24 "Occupational environment and ovarian cancer      25 risk," on which you're the third author,</p>	Page 91	Page 93
		<p>1 A. Sorry?      2 Q. Did this paper address talc and      3 ovarian cancer?      4 A. It doesn't address cosmetic      5 perineal talc, no. That -- that's -- that was      6 the issue on which I would have had a conflict      7 of interest.      8 Q. Did you ask the -- did you ask the      9 publishers whether it is accurate and proper to      10 not include your competing interest when the      11 paper addresses talc exposure generally rather      12 than limited to perineal talc?      13 MS. PARFITT: Objection. Form.      14 THE WITNESS: No, I didn't consult      15 anybody.      16 BY MS. DAVIDSON:      17 Q. Okay. Do you recall testifying in      18 2021 that you believed it is important for a      19 paid expert in litigation to disclose both the      20 fact that he or she has been retained as an      21 expert and which side he or she is retained on      22 behalf of?      23 A. Are you asking if I recall saying      24 that, or if I would say --      25 Q. Well, first, do you recall that?</p>

24 (Pages 90 - 93)

<p style="text-align: right;">Page 94</p> <p>1 A. No, I don't recall.</p> <p>2 Q. Do you disagree with that</p> <p>3 statement?</p> <p>4 A. No, I don't disagree with it.</p> <p>5 Q. Let's go to the Davis paper, 2021.</p> <p>6 Let's mark that as Exhibit 4.</p> <p>7 A. Sorry. The Davis paper?</p> <p>8 Q. Yes.</p> <p>9 THE COURT REPORTER: I'm sorry.</p> <p>10 think that should be Exhibit 5.</p> <p>11 MS. DAVIDSON: Oh, okay. Great. I</p> <p>12 can never get it right. It's a running</p> <p>13 joke that I can never keep track.</p> <p>14 All right. We're marking as</p> <p>15 Exhibit 5 a paper entitled --</p> <p>16 THE WITNESS: Michelle, are you</p> <p>17 looking for that or should I --</p> <p>18 MS. PARFITT: Yeah. Give us one</p> <p>19 second.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. -- "Genital powder use and risk of</p> <p>22 epithelial ovarian cancer --</p> <p>23 A. Wait. Hold on. Wait. We're</p> <p>24 looking for the article.</p> <p>25 Q. Okay. That's fine. I'm marking it</p>	<p style="text-align: right;">Page 96</p> <p>1 paper --</p> <p>2 MR. TISI: What's confusing --</p> <p>3 MS. DAVIDSON: -- great. Let's go</p> <p>4 off the record.</p> <p>5 MR. TISI: Excuse me.</p> <p>6 MS. DAVIDSON: Chris, we have one</p> <p>7 person --</p> <p>8 MR. TISI: Excuse me.</p> <p>9 MS. DAVIDSON: No. We have one</p> <p>10 person defending this deposition.</p> <p>11 MR. TISI: I understand, but it's</p> <p>12 confusing. It's about 6 inches.</p> <p>13 MS. DAVIDSON: Okay.</p> <p>14 MR. TISI: 6 inches. I got to get</p> <p>15 him the copy of the paper.</p> <p>16 MS. DAVIDSON: Is it you or</p> <p>17 Michelle defending this deposition?</p> <p>18 MR. TISI: Okay. Michelle, will</p> <p>19 you tell her how big the screen is.</p> <p>20 MS. DAVIDSON: Let's go off the</p> <p>21 record while you look for the paper.</p> <p>22 MR. TISI: Fine. Thank you.</p> <p>23 (Discussion held off the record.)</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. I'd like to read the conflict of</p>
<p style="text-align: right;">Page 95</p> <p>1 as an exhibit.</p> <p>2 A. Okay. Thank you. Sorry.</p> <p>3 Q. We're marking as Exhibit 5,</p> <p>4 "Genital powder use and risk of epithelial</p> <p>5 ovarian cancer in the ovarian cancer in women</p> <p>6 of African ancestry consortium." First author</p> <p>7 Davis, published in 2021.</p> <p>8 (Whereupon, Defendant's Exhibit D5,</p> <p>9 Paper entitled, "Genital powder use and</p> <p>10 risk of epithelial ovarian cancer in the</p> <p>11 Ovarian Cancer in Women of African</p> <p>12 Ancestry Consortium," by Colette P.</p> <p>13 Davis, et al., was marked for</p> <p>14 identification.)</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. Can you please turn to the bottom</p> <p>17 of page 1?</p> <p>18 MR. TISI: You've got -- you've got</p> <p>19 to wait until we get the paper. Okay?</p> <p>20 It's okay for you to identify it.</p> <p>21 MS. DAVIDSON: I'm sorry. We sent</p> <p>22 it to you in the chat.</p> <p>23 MR. TISI: I understand, but --</p> <p>24 MS. DAVIDSON: Fine. If you're</p> <p>25 going to take the time to find the</p>	<p style="text-align: right;">Page 97</p> <p>1 disclosure statement. It says --</p> <p>2 A. Sorry?</p> <p>3 Q. It says, "Patricia Moorman has</p> <p>4 received compensation for work related to</p> <p>5 litigation in regard to talc and ovarian</p> <p>6 cancer. All other authors report no conflict</p> <p>7 of interest."</p> <p>8 Did I read that correctly?</p> <p>9 A. Yes.</p> <p>10 Q. Does -- does Ms. -- Dr. Moorman</p> <p>11 disclose here which side she testified on</p> <p>12 behalf of?</p> <p>13 MS. PARFITT: Objection. Form.</p> <p>14 THE WITNESS: I don't see that</p> <p>15 indicated, no.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. And do you recall that you</p> <p>18 testified in 2021 that a proper</p> <p>19 conflict-of-interest disclosure would say which</p> <p>20 side you're appearing on behalf of, correct?</p> <p>21 A. Yes, yes.</p> <p>22 Q. Okay. Thank you.</p> <p>23 If we could turn to Table 3.</p> <p>24 A. Of what? Of the Davis paper?</p> <p>25 Q. Yeah. We're still on the Davis</p>

1 paper. 2 A. Okay. 3 Q. Table 3 for African American women, 4 the OR is lower than for all participants and 5 for white participants and also is not 6 statistically significant, correct? 7 A. I'm still looking for that page. 8 Sorry. 9 Table 3 you said? 10 Q. Yeah. It's up on the screen. 11 A. Yeah. I'm sorry. The screen font 12 is too small for me to read. 13 But I have the paper in front of 14 me. 15 Can you repeat your question? 16 Q. The OR for African American women 17 is lower than the OR for white women, correct? 18 A. Sorry. I don't see -- where -- 19 where are the results for African American 20 women? 21 Oh, yes, yes. Okay. I'm 22 reorienting myself to this particular layout. 23 And which particular -- can you 24 point to particular cells in this table that 25 you are looking at?	Page 98 1 women is statistically significant, correct? 2 MS. PARFITT: Objection. Form. 3 THE WITNESS: That's correct. 4 BY MS. DAVIDSON: 5 Q. Thank you. 6 A. The term "statistically 7 significant" has to be qualified. 8 You mean at the .05 level, I 9 assume. 10 Q. Thank you. 11 A. Is that correct? 12 To clarify your question. Because 13 statistical significance -- 14 MS. PARFITT: He's still talking. 15 BY MS. DAVIDSON: 16 Q. I understand your testimony. 17 A. -- depends on the level of alpha 18 error that you assume in the test. 19 Q. The Davis paper did not find a 20 dose-response relationship, right? 21 A. I -- I don't know. 22 In which -- which table would I 23 find those results? 24 Q. You don't recall from reviewing 25 this paper?
Page 99 1 Q. I'm just asking you, 2 Dr. Siemiatycki, is the OR for African American 3 women lower than the OR for white women? 4 A. The results here for all cases, 5 high-grade -- 6 Q. All cases. Let's look at all 7 cases. 8 A. Okay. Thank you for that. So -- 9 so the 1.22 for African American women and 10 versus the 1.32 for all participants, is that 11 what you're comparing or asking me? 12 Q. Doctor, I asked about white women, 13 correct? 14 A. No. I -- I didn't remember every 15 word that you used in your preamble. 16 So yes. Thank you. 17 Q. It wasn't a preamble. It was a 18 question. 19 And my question was: Is the OR for 20 African American women under all cases lower 21 than for white women? 22 A. The point estimate is lower, yes. 23 Q. And also, the point estimate for 24 African American women is not statistically 25 significant, while the point estimate for white	Page 101 1 When's the last time you looked at 2 this paper, Doctor? 3 MS. PARFITT: Jessica, I might add 4 that I will give you a little leeway; but 5 back in your '21 deposition -- and I can 6 give you the pages -- Dr. Siemiatycki was 7 examined with regard to the Davis paper on 8 page -- 9 MS. DAVIDSON: Michelle, I'm not 10 going to go through this with every 11 question. It was added to his 2021 report 12 -- to his 2023. It wasn't in that report. 13 I'm more than able to ask him about it. 14 If you want to take that to the judge, go 15 ahead because we'll win. 16 BY MS. DAVIDSON: 17 Q. Dr. Siemiatycki -- 18 MS. PARFITT: Well, Jessica, that's 19 quite conclusionary. But my point being 20 this: You examined on page 143 of his 21 2021 deposition the Davis article. Let 22 this record reflect that. I'll give you a 23 little leeway, Jessica. 24 MS. DAVIDSON: You're not giving me 25 leeway, Michelle. That's bullshit. I

<p style="text-align: right;">Page 102</p> <p>1 mean, come on.</p> <p>2 MS. PARFITT: Oh, my goodness,</p> <p>3 Jessica. You should watch your language.</p> <p>4 MS. DAVIDSON: Michelle, it's just</p> <p>5 like this entire deposition, every</p> <p>6 question I ask, either you're</p> <p>7 filibustering it or Dr. Siemiatycki's</p> <p>8 answering a question I haven't asked.</p> <p>9 It's getting very, very frustrating. It's</p> <p>10 getting very frustrating.</p> <p>11 You know very well that he added a</p> <p>12 section to his report about Davis. I'm</p> <p>13 sorry for my foul language. I'm just</p> <p>14 incredibly, incredibly frustrated because</p> <p>15 I'm asking you guys to just let me ask my</p> <p>16 questions. Let the doctor answer them.</p> <p>17 You know there's this in the</p> <p>18 report. You're not giving me leeway.</p> <p>19 It's the -- there's no need for leeway</p> <p>20 because it's added to his report. Like,</p> <p>21 to suggest that you're giving me leeway,</p> <p>22 is disingenuous.</p> <p>23 And, again, I apologize for losing</p> <p>24 my temper. I apologize for my foul mouth,</p> <p>25 but you're not giving me any leeway.</p>	<p style="text-align: right;">Page 104</p> <p>1 with Ms. Parfitt?</p> <p>2 A. No. I had 200 papers in my</p> <p>3 binders, and I didn't look at all of them in</p> <p>4 the last three days. And I looked at the ones</p> <p>5 that I considered the most important ones, not</p> <p>6 necessarily the ones -- well, so I would have</p> <p>7 to look at the paper to answer your questions</p> <p>8 about it. I can't, by memory, recall</p> <p>9 everything that's in the paper.</p> <p>10 Q. So you do not recall whether the</p> <p>11 Davis paper found a dose response?</p> <p>12 A. Not without looking at it.</p> <p>13 Q. If I were to tell you that the</p> <p>14 Davis paper stated, "Furthermore, there was not</p> <p>15 a dose-response relationship between frequency</p> <p>16 or duration of genital powder use and ovarian</p> <p>17 cancer risk or any significant differences in</p> <p>18 association by histotype," that does not</p> <p>19 refresh your recollection?</p> <p>20 MS. PARFITT: Can you point us to a</p> <p>21 page, Jessica?</p> <p>22 MS. DAVIDSON: I'm sorry, Michelle?</p> <p>23 MS. PARFITT: Maybe -- I'm sorry.</p> <p>24 If you could just point him to a page.</p> <p>25 MS. DAVIDSON: Asher -- I keep</p>
<p style="text-align: right;">Page 103</p> <p>1 This was added to his report; and</p> <p>2 obviously it's fair game for questioning,</p> <p>3 Michelle.</p> <p>4 And you and I generally get along,</p> <p>5 so let's just get along today.</p> <p>6 Again, I'm sorry I lost my temper.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Dr. Siemiatycki?</p> <p>9 MS. PARFITT: Let's --</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. Dr. Siemiatycki, when is the last</p> <p>12 time you looked at the Davis paper?</p> <p>13 A. I can't recall. I certainly</p> <p>14 haven't done a sort of an in-depth forensic</p> <p>15 evaluation of it in at least a month or so or</p> <p>16 maybe longer, but I -- I probably skimmed it</p> <p>17 recently; but not -- it's not -- it's not fresh</p> <p>18 in my memory.</p> <p>19 Q. You didn't look at it when you were</p> <p>20 preparing for your deposition with Ms. --</p> <p>21 A. When I --</p> <p>22 Q. -- with Ms. Parfitt?</p> <p>23 A. When I looked at what?</p> <p>24 Q. Did you look at the Davis paper</p> <p>25 when you were preparing for your deposition</p>	<p style="text-align: right;">Page 105</p> <p>1 calling Noah Asher. Asher is on vacation.</p> <p>2 Noah, can you please put up this</p> <p>3 language?</p> <p>4 MS. PARFITT: Thank you, Jessica.</p> <p>5 We appreciate it.</p> <p>6 MS. DAVIDSON: Of course.</p> <p>7 THE WITNESS: Am I waiting for you</p> <p>8 to point out a page?</p> <p>9 MS. PARFITT: He just put it on the</p> <p>10 screen.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. "We observed" -- it's in the bottom</p> <p>13 paragraph there: "We observed no clear</p> <p>14 dose-response trends for frequency or duration</p> <p>15 of genital powder use and ovarian cancer risk</p> <p>16 among AA women or white women."</p> <p>17 Do you see that?</p> <p>18 A. Yes.</p> <p>19 MS. PARFITT: It's on page 8</p> <p>20 doctor.</p> <p>21 THE WITNESS: Yes, I do.</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. Did you address that in your</p> <p>24 report?</p> <p>25 A. What do you mean by did I "address</p>

<p>1 that"?</p> <p>2 Q. Did you address in your report the 3 fact that Davis did not find a dose-response 4 relationship?</p> <p>5 A. No, I didn't.</p> <p>6 Q. Okay.</p> <p>7 A. It didn't change anything in my -- 8 it wouldn't have changed anything in my report.</p> <p>9 Q. So if we could mark your report as 10 Exhibit 6.</p> <p>11 (Whereupon, Defendant's Exhibit D6, 12 Second Amended Expert Report of Jack 13 Siemiatycki, MSc, PhD, was marked for 14 identification.)</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. In the back of your report, Doctor, 17 you have some tables, right?</p> <p>18 A. Yes.</p> <p>19 Q. And some of those tables address 20 dose response, right?</p> <p>21 A. Yes.</p> <p>22 MS. PARFITT: He is still looking 23 at the Davis paper. You've now directed 24 him to the expert report.</p> <p>25 Jessica, I'll make comment too. I</p>	<p>Page 106</p> <p>1 tables is that it overlaps with other papers?</p> <p>2 A. Yes.</p> <p>3 Q. Okay. Let's move on.</p> <p>4 Let's look at Phung 2022.</p> <p>5 MS. PARFITT: Jessica, we're just 6 grabbing his paper.</p> <p>7 MS. DAVIDSON: No problem. No 8 problem. Phung 2022 is Exhibit 7.</p> <p>9 (Whereupon, Defendant's Exhibit D7, 10 Paper entitled, "Effects of risk factors 11 for ovarian cancer in women with and 12 without endometriosis," by Minh Tung 13 Phung, MPH, PhD, et al., was marked for 14 identification.)</p> <p>15 MS. DAVIDSON: Let's -- let's mark 16 it as, "Effects of risk factors for 17 ovarian cancer in women with and without 18 endometriosis." The first author is Phung 19 2022.</p> <p>20 MR. TISI: Wait a second.</p> <p>21 MS. DAVIDSON: And I want to go 22 down to page -- I want to -- okay. Sure. 23 I just want to go to page 960.</p> <p>24 MR. TISI: We're not listening to 25 you right now because he's finding the</p>
<p>1 know this is really hard. He's a little 2 hard of hearing.</p> <p>3 So just -- just -- I'm being 4 delicate, Doctor. I'll make that point. 5 She's just told you she's gone to your 6 expert report.</p> <p>7 THE WITNESS: Okay.</p> <p>8 MS. PARFITT: Thank you, Jessica.</p> <p>9 I appreciate it.</p> <p>10 MS. DAVIDSON: Michelle, nobody has 11 ever complained that my voice is too soft. 12 It's usually the opposite.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. Doctor, did you add the Davis paper 15 to the tables in the back of your report?</p> <p>16 A. No, I didn't. In fact, it's coming 17 back to me. My recollection is that the data 18 in the Davis paper, in fact, overlaps with the 19 data in some of the other stud- -- some of the 20 other articles that have been written.</p> <p>21 And if you give me some time, I'll 22 try to figure out which papers it overlaps 23 with.</p> <p>24 Q. So, Doctor, your testimony is that 25 the reason you didn't include Davis in your</p>	<p>Page 107</p> <p>1 paper.</p> <p>2 MS. DAVIDSON: Understood.</p> <p>3 Understood.</p> <p>4 MR. TISI: Give us a moment, and 5 we'll see if we can find it.</p> <p>6 MS. DAVIDSON: I want to go to the 7 authors' conflict statement.</p> <p>8 For some reason, Noah, I have 9 different page numbers because sometimes 11 one is the one pulled off the web, and one 12 is the one that's not; and I think that's 13 creating some confusion with you. But 14 yes, this is --</p> <p>15 MR. EPSTEIN: Yeah. I'm seeing 16 that.</p> <p>17 Am I in the right spot.</p> <p>18 MS. DAVIDSON: That was the problem 19 with the Davis paper as well.</p> <p>20 MR. EPSTEIN: Sorry about that.</p> <p>21 MS. DAVIDSON: I have different 22 versions. I'm sorry about that, but now 23 you're moving --</p> <p>24 MR. EPSTEIN: Okay. Did I -- did 25 I --</p> <p>MS. DAVIDSON: You've just gone to</p>

<p>1 the wrong page. I want to go to the 2 disclosures.</p> <p>3 It's weird. What you have up here 4 has some Spanish in it. Okay. So here we 5 go. Yeah. Down there.</p> <p>6 MR. EPSTEIN: Okay.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. If we look at the disclosures 9 acknowledgements, Doctor.</p> <p>10 A. I'm sorry. Look at what?</p> <p>11 Q. We're looking at the, I believe 12 it's the very last page, acknowledgements.</p> <p>13 It says -- and I'll read to you, 14 except it's -- you have issues with your ears. 15 I have issues with my eyes. We're a great 16 pair -- we're a great pair here today. But it 17 says --</p> <p>18 A. Hear no evil. See no evil.</p> <p>19 Q. It says, "D.W.C. reports payments 20 from expert -- for expert testimony from 21 Ferraro Law Firm and Ashcarft and Gerel Law 22 Firm."</p> <p>23 Do you see that?</p> <p>24 A. In the last -- in the paragraph 25 labeled "Acknowledgements"?</p>	<p>Page 110</p> <p>1 Ashcraft and Gerel is or the Ferraro Law Firm?</p> <p>2 A. I doubt it but --</p> <p>3 Q. Okay. So -- so the average person 4 would not -- who reads this -- who reads 5 medical journals would not know whether 6 Dr. Cramer was a witness for the plaintiffs or 7 for the defense, correct?</p> <p>8 MS. PARFITT: Objection. Form.</p> <p>9 THE WITNESS: Correct. Correct.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. Okay. Let's move on.</p> <p>12 If we could look at Table 2.</p> <p>13 A. Of which paper now?</p> <p>14 Q. We're on the same paper.</p> <p>15 A. Okay.</p> <p>16 Q. Table 2.</p> <p>17 MS. DAVIDSON: You've got to turn 18 it right side up, Noah.</p> <p>19 MR. EPSTEIN: Yeah. Let me figure 20 out how to do that. Sorry about that.</p> <p>21 MS. DAVIDSON: Noah has been a 22 lawyer for three months, so let's all give 23 him a kudos for doing a great job.</p> <p>24 MS. PARFITT: Jessica, we're fine 25 with that.</p>
<p>1 Q. Yes. So the third paragraph, 2 "Acknowledgements" on line 6.</p> <p>3 A. I must not be looking in the right 4 place.</p> <p>5 Q. If you look up on the -- on the 6 camera -- on the screen, I will read it to you.</p> <p>7 A. Okay. Can you blow up that about 8 threefold?</p> <p>9 Q. Fourfold. "D.W.C. reports" --</p> <p>10 A. Are we talking about the Phung 11 paper?</p> <p>12 Q. I'm reading you the sentence. It's 13 really half a sentence.</p> <p>14 It says, "D.W.C. reports payment 15 from expert testimony from Ferraro Law Firm and 16 Ashcarft and Gerel Law Firm."</p> <p>17 Do you see that?</p> <p>18 A. Okay.</p> <p>19 MS. PARFITT: Let the record 20 reflect I have directed the doctor to it.</p> <p>21 MS. DAVIDSON: Thank you, Michelle.</p> <p>22 THE WITNESS: Okay.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. Okay. Would the average person 25 reading scientific papers know what the</p>	<p>Page 111</p> <p>1 MS. DAVIDSON: Noah, it's your 2 first deposition?</p> <p>3 MR. EPSTEIN: Yes.</p> <p>4 MS. DAVIDSON: Your last?</p> <p>5 MR. EPSTEIN: So Table 2. I'm -- I 6 can't get it to --</p> <p>7 MS. PARFITT: Hey, Noah, we have 8 it.</p> <p>9 MR. LYONS: I have the paper.</p> <p>10 MR. EPSTEIN: Okay. Thank you.</p> <p>11 MR. LYONS: I'm also happy to pull 12 it up if you want. I have the version, I 13 believe, that Dr. Siemiatycki has, which 14 is the final published version, rather 15 than the author manuscript.</p> <p>16 MS. DAVIDSON: We have it as well, 17 Noah. I'm not sure why you have the 18 author manuscript there.</p> <p>19 BY MS. DAVIDSON:</p> <p>20 Q. Okay. So, Dr. Siemiatycki, what is 21 the reported OR for first-degree family history 22 of ovarian cancer with endometriosis?</p> <p>23 A. With endometriosis? So we're 24 looking sort of at the bottom right-hand area 25 of that table, and there is an OR of 1.58.</p>

<p>1 Is that the one you're looking at? 2 Q. Okay. And what is the OR for 3 first-degree family history of ovarian cancer 4 without endometriosis? 5 A. It looks like it's 2.20. 6 Q. Why would having endometriosis 7 cause the risk factor of first-degree family 8 history, to go down? 9 MS. PARFITT: Objection. Form. 10 THE WITNESS: Well, I don't know 11 that it does. 12 Among other things, when I -- when 13 I look at relative risk estimates, I also 14 look at the confidence intervals around 15 them to see what the data really means. 16 And if you notice, the upper 17 confidence limit of both of those point 18 estimates that you highlighted are 19 identical -- that's a coincidence -- at 20 2.57; but the important part of the 21 message is that they don't differ very 22 much. Statistically, they overlap 23 greatly. 24 And so the two point estimates of 25 1.58 that you pointed at and 2.20 that you</p>	<p>Page 114 1 different as the point estimates would 2 indicate. 3 Q. So do these -- do these two 4 confidence intervals overlap considerably? 5 A. They do overlap considerably. 6 Q. And how do you define "overlap 7 considerably"? 8 You knew I was going to ask that. 9 A. Yeah. So I mean, if you imagine in 10 your mind sort of a little graphic display with 11 one of them showing the odds ratio for women 12 with endometriosis and one without, the middle 13 of the two confidence intervals would be 14 different. 15 One goes from 1.88 to 2.57, so it 16 is -- it covers that part of the graph. And 17 the other one covers the part of the graph from 18 .97 to 2.57. And, you know, just by eyeballing 19 it, you can see that they overlap. Those two 20 ranges overlap considerably. 21 Now, it's possible to do 22 statistical tests to show to what -- whether 23 the amount of overlap is so -- the difference 24 is so great that despite the variability, 25 there's still significant differences between</p>
<p>1 pointed at, although they look different, 2 would not be -- they're not so different 3 that they require theorizing about. 4 BY MS. DAVIDSON: 5 Q. Okay. So let me make sure I 6 understand. 7 Are you saying that if two 8 confidence intervals overlap, they're not so 9 different that they suggest an actual effect 10 difference? 11 And forgive me if my language 12 isn't -- 13 A. Yeah. No. I -- I -- I forgive you 14 if you forgive me my verbal errors. 15 I'm saying that if you look at two 16 confidence intervals for the same parameter and 17 you're trying to compare them, if they overlap 18 considerably -- and I'm not going to define 19 what I mean by "considerably" -- but if they 20 overlap considerably, then the plausible range 21 of true underlying relative risks for the two 22 entities that you're comparing, the women with 23 first-degree history and the women -- sorry, 24 the women with endometriosis and the women 25 without endometriosis, that they are not as</p>	<p>Page 115 Page 117 1 them. 2 But in this case I can assure you 3 that if you did such a test, it would show that 4 there is no statistically significant 5 difference between those two estimates. 6 Q. How is that test done? 7 A. So I -- I think it started when you 8 asked me to speculate on possible reasons for 9 the differences. And my answer would be that I 10 wouldn't even go to the point of trying to find 11 an explanation, which might not be -- for 12 something that might not be their, namely a 13 difference between endometri- -- with 14 endometriosis and without endometriosis. 15 Q. Right. My question was: Like, 16 when you use the term "overlap considerably," 17 is that just sort of subjective of what you 18 see; or is there an actual mathematical test? 19 A. The actual mathematical test would 20 be a test of the difference between the point 21 estimates of 2.20 and 1.58, the difference 22 between those two, considering the variability 23 of those two estimates or the imprecision. 24 Those two are imprecise estimates. The 25 imprecision is captured by the 95-percent</p>

<p>1 confidence interval.</p> <p>2        And if you do the mathematics to</p> <p>3 plug in the point estimates and the confidence</p> <p>4 intervals, that's how you would test the</p> <p>5 difference between the two.</p> <p>6        And no, in the past 30 seconds, I</p> <p>7 have not done such a test; but by experience, I</p> <p>8 can tell you that it's not even close to</p> <p>9 statistically significant.</p> <p>10      Q. Got it. So you're saying the</p> <p>11 difference -- just to make sure I understand,</p> <p>12 you're saying the difference in the confidence</p> <p>13 intervals is not statistically significant?</p> <p>14      A. No. I'm saying the difference in</p> <p>15 the point estimates is -- given the confidence</p> <p>16 intervals.</p> <p>17      Q. Okay.</p> <p>18      A. The difference in the point</p> <p>19 estimates, I'm saying, is not statistically</p> <p>20 significantly different.</p> <p>21      Q. So the difference between 1.58 and</p> <p>22 2.20 is not statistically significant because</p> <p>23 there is considerable overlap in the confidence</p> <p>24 intervals --</p> <p>25      A. Yes.</p>	<p>Page 118</p> <p>1 confidence interval or not. It is pretty wide.</p> <p>2        But I'm saying that the two</p> <p>3 confidence intervals overlap considerably.</p> <p>4      Q. Okay.</p> <p>5      A. And that means that a whole range</p> <p>6 of -- what -- what you're really interested in</p> <p>7 when you're making these kind of estimates is</p> <p>8 what is the true underlying relative risk, not</p> <p>9 what is the relative risk in this sample of</p> <p>10 women in such and such a city that I happen to</p> <p>11 interview in such a year or so on.</p> <p>12       You're trying to make a generic,</p> <p>13 generalizable estimate of something. And the</p> <p>14 something is what is the relative risk among</p> <p>15 women with endometriosis.</p> <p>16       Now, you have a small sample of</p> <p>17 people in -- in these studies, small enough</p> <p>18 that the -- each -- well, no matter what the</p> <p>19 size is, each statistical estimate of point</p> <p>20 estimate embodies a certain degree of</p> <p>21 precision. And that degree of precision can be</p> <p>22 expressed in various forms.</p> <p>23       And one way of expressing it is in</p> <p>24 the width of the confidence interval. And the</p> <p>25 confidence interval can be -- you can think of</p>
<p>1      Q. -- is that a fair way to put it?</p> <p>2      A. That's a fair way to put it. I</p> <p>3 mean, the overlap in the confidence intervals</p> <p>4 is just another way of expressing that there's</p> <p>5 a lot of statistical imprecision in the two</p> <p>6 point estimates.</p> <p>7      Q. I'm sorry. Can you explain that</p> <p>8 again?</p> <p>9      A. Yes. Sorry. So the -- you know,</p> <p>10 what -- I use the overlap in the confidence</p> <p>11 intervals as a shorthand for me because I</p> <p>12 understand the implications that -- to indicate</p> <p>13 that the two point estimates are very unstable.</p> <p>14 They depend on small numbers and they could</p> <p>15 fluctuate.</p> <p>16       And, you know, I don't know if you</p> <p>17 want to go to examples about flipping coins;</p> <p>18 and, you know, I could sort of conjure</p> <p>19 up some --</p> <p>20      Q. Sorry, Doctor.</p> <p>21       Is 1.88 to 2.57, that's a wide</p> <p>22 confidence interval?</p> <p>23      A. 1.88 to 2.57?</p> <p>24      Q. Uh-huh.</p> <p>25      A. I'm not saying it's a wide</p>	<p>Page 119</p> <p>1 it as indicating the range of true underlying</p> <p>2 relative risks that can be -- that could</p> <p>3 hypothetically be found in the total population</p> <p>4 if you had, you know, the total population of</p> <p>5 the United States or an infinite population,</p> <p>6 even, of women who you've interviewed and you</p> <p>7 know really, you know, what is the</p> <p>8 endometriosis status and so on.</p> <p>9       But the -- you don't have that.</p> <p>10 You have an estimate from a sample. And the</p> <p>11 estimate of 2.20 is your best estimate from</p> <p>12 this sample of the true underlying relative</p> <p>13 risk.</p> <p>14       The confidence interval tells you</p> <p>15 how good your sample estimate is, how precise</p> <p>16 it is in capturing the true underlying relative</p> <p>17 risk. And it's kind of telling you that with</p> <p>18 95-percent probability, the true underlying</p> <p>19 relative risk among the women without</p> <p>20 endometriosis -- I'm just taking that as the</p> <p>21 example -- that the true underlying risk,</p> <p>22 there's a 95-percent probability that it's</p> <p>23 somewhere in the range from 1.88 to 2.57.</p> <p>24       So you could have think of the</p> <p>25 confidence interval as an expression of that</p>

<p>Page 122</p> <p>1 kind of statement. It's -- it's -- what I've    2 just said it's not strictly a hundred percent    3 accurate. It's a more complicated, slightly    4 more complicated statistical issue, but need no    5 need to get in to it.</p> <p>6 At a first approximation, you can    7 think of the confidence interval as telling you    8 how close your sample -- what is the range of    9 possible underlying true relative risks that    10 are compatible with the data that you've    11 collected.</p> <p>12 And this is saying that for the    13 without endometriosis women, the true relative    14 risk ranges from -- with 95-percent probability    15 from 1.88 to 2.57; whereas, for with    16 endometriosis, it ran -- the true value ranges    17 from .97 to -- to 2.57. And those two ranges    18 are -- you know, it's just common sense. They    19 overlap a lot. A lot of those two ranges, you    20 know, one -- one is largely subsumed in the    21 other.</p> <p>22 Q. Okay. I think I've got it. Thank    23 you.</p> <p>24 A. Thank you.</p> <p>25 Q. Let's mark as Exhibit 8 the Gabriel</p>	<p>Page 124</p> <p>1 MS. PARFITT: Let the record    2 reflect, I've just handed the doctor a    3 blank copy of the Gabriel paper.</p> <p>4 MS. DAVIDSON: Okay.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Doctor, this paper was published in    7 2019. If I read your reports right and the    8 redline, you did not include it in your 2021    9 report; but you included it in your 2023    10 report. Is that correct?</p> <p>11 A. I'll take your word for that. I    12 can't remember.</p> <p>13 Q. Do you know why you didn't include    14 it originally and included it now?</p> <p>15 A. Well, I -- I guess I included it    16 now because I came upon it at some point. And    17 I didn't include it in 2021. I don't know. It    18 might have been an oversight. I -- I can't    19 think that there would have been a -- I'm not    20 sure -- I'm not sure why. I don't see --</p> <p>21 Q. Okay. Can we go to the Disclosure    22 of Potential Conflicts of Interest.</p> <p>23 A. That's at the back of the article,    24 I think. Oh, yes. I see that.</p> <p>25 Q. It says here, "A.F. Vitonis has</p>
<p>Page 123</p> <p>1 2019 paper.</p> <p>2 MS. PARFITT: And, Jessica, just    3 give us a moment to get that paper. I    4 appreciate it.</p> <p>5 (Whereupon, Defendant's Exhibit D8,    6 Paper entitled, "Douching, Talc Use, and    7 Risk for Ovarian Cancer and Conditions    8 Related to Genital Tract Inflammation," by    9 Iwona M. Gabriel, et al., was marked for    10 identification.)</p> <p>11 MS. DAVIDSON: This paper.</p> <p>12 MS. PARFITT: Again, one moment. I    13 don't want to take your time.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. This paper is entitled, "Douching,    16 Talc Use, and Risk for Ovarian Cancer and    17 Conditions Related to Genital Tract    18 Inflammation." The authors are Iwona Gabriel,    19 Allison Vitonis, William Welch, Linda Titus,    20 and Daniel Cramer.</p> <p>21 Do you see that?</p> <p>22 A. Yeah. I'm --</p> <p>23 MS. PARFITT: One second, Jessica.</p> <p>24 THE WITNESS: We're just looking    25 for it. Sorry.</p>	<p>Page 125</p> <p>1 provided statistical programming to support    2 expert testimony for Beasley Allen Law Firm.    3 D.W. Cramer has provided expert testimony for    4 Beasley Allen Law Firm."</p> <p>5 Do you see that?</p> <p>6 A. Yes, I do.</p> <p>7 Q. And you'll agree with me that the    8 average person who is reading a journal    9 entitled "Cancer Epidemiology, Biomarkers &amp;    10 Prevention" would not know what the Beasley    11 Allen Law Firm is, correct?</p> <p>12 MS. PARFITT: Objection. Form.</p> <p>13 THE WITNESS: Correct.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. So the average person reading this    16 paper would not be able to determine which side    17 Dr. Cramer and Mr. -- or Dr. Vitonis was    18 providing testimony for, right?</p> <p>19 MS. PARFITT: Objection. Form.</p> <p>20 THE WITNESS: Correct.</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Okay. Have you ever spoken to    23 either Dr. O'Brien or Dr. Wentzensen?</p> <p>24 A. Not that I'm aware of. Not that I    25 recall.</p>

<p>1 Q. Are you familiar -- are you 2 familiar with their reputations? 3 A. I'm familiar with their 4 publications in the -- in the talc domain that 5 are part of the references in my report. 6 Q. Do you know where they work? 7 A. I think they work in North 8 Carolina, if I'm not mistaken, at Research 9 Triangle Park for -- maybe for NIEHS; but I'm 10 not positive. I'm just recollecting or 11 guessing. I'm not sure. 12 Q. And they -- they are not expert 13 witnesses for either side on this litigation, 14 correct? 15 MS. PARFITT: Objection. Form. 16 THE WITNESS: I -- there's no way I 17 would know that. I have no idea. 18 BY MS. DAVIDSON: 19 Q. Well, have they disclosed any 20 conflicts of interest? 21 MS. PARFITT: Objection. Form. 22 THE WITNESS: Where? 23 BY MS. DAVIDSON: 24 Q. In their papers. 25 Do you recall seeing any conflicts</p>	Page 126	<p>1 of interest were disclosed in their papers? 2 A. I haven't memorized all the 3 conflict-of-interest paragraphs in every paper 4 I've looked at. So I don't -- 5 Q. Do you know whether employees of 6 the National Institutes of Health are even 7 allowed to serve as experts in private 8 litigation? 9 MS. PARFITT: No. I have no idea. 10 BY MS. DAVIDSON: 11 Q. You wouldn't be surprised to learn 12 that ex -- that -- that scientists who work for 13 the federal government are not allowed to serve 14 as experts in litigation, would you? 15 MS. PARFITT: Objection. Form. 16 THE WITNESS: No, I wouldn't be 17 surprised to learn that. 18 MS. DAVIDSON: Okay. Let's go off 19 the record. 20 (Whereupon, a break was taken.) 21 BY MS. DAVIDSON: 22 Q. We're going to mark as Exhibit 9 a 23 paper entitled, "A critical review of talc and 24 ovarian cancer," by Julie Goodman, et al. 25 And Julie is the corresponding</p>	Page 128
			Page 129

Page 130	Page 132
1 Q. Were you suggesting anything with 2 that language? 3 A. Yeah. I can't say that I'm 4 completely naive about the use of that 5 language; so I guess it -- in my mind, reading 6 the article, it felt like it would have been a 7 solicited paper to defend a point of view. 8 Q. Did you feel that way about 9 Dr. Egilman's letter to the editor responding 10 to other papers? 11 MS. PARFITT: Objection. Form. 12 THE WITNESS: You know, I didn't 13 feel exactly the same way about it. 14 BY MS. DAVIDSON: 15 Q. And why is that? 16 A. Sorry? 17 Q. Why is that? 18 A. Well, because for one thing, he was 19 on a completely -- he took a completely 20 different editorial opinion to the issues at 21 hand; but I -- I don't know -- I don't know for 22 a fact -- I suspect that Egilman was more of a 23 self-initiated intervenor in this matter. 24 Whereas, a private contract firm would more 25 likely be responding to a request.	1 kinds of issues, including female cancer risks 2 from various hormonal factors. But -- so I'm 3 not sure if it's the same person. I didn't 4 look her up specifically when I saw the name on 5 this article. 6 Q. So your opinions about the validity 7 of this article are -- are not based on any 8 actual knowledge of Dr. Goodman's background, 9 correct? 10 A. I guess not. 11 Q. Is Johns Hopkins -- 12 A. I don't know which Dr. Goodman it 13 was. I didn't look -- as I said, I didn't look 14 her up to see if it was the one that I recall 15 from previous experience. 16 Q. Do you know if Johns Hopkins has a 17 strong epidemiology program? 18 A. Yes. Quite -- 19 MS. PARFITT: Objection. Form. 20 THE WITNESS: Quite strong. 21 BY MS. DAVIDSON: 22 Q. And do you know whether Dr. Goodman 23 is a fellow of the American College of 24 Epidemiology? 25 A. If it's the one -- if it's the
Page 131	Page 133
1 Q. Do you have any objective basis for 2 that assumption? 3 A. Which part of it? 4 Q. The part about Dr. Egilman and the 5 part about this paper? 6 A. I know Egilman a little bit, and I 7 know that he is a very energetic, active 8 proponent of his scientific beliefs and 9 theories; and he doesn't really -- in my 10 experience, he doesn't need a solicitation from 11 a law firm or a company or an intervenor to -- 12 to put forth his opinions. 13 So that would be, you know, the 14 basis for my prejudiced or, you know, 15 subjective view about the motivations. In that 16 I'm not implying the validity or the quality of 17 either of the points of view. 18 Q. Does Dr. Egilman have a degree in 19 epidemiology? 20 A. I'm not sure. I don't know. 21 Q. Does Dr. Goodman have a degree in 22 epidemiology? 23 A. I think -- you know, I'm not sure 24 if it's the one that I remember from sort of a 25 career at Harvard doing epidemiology on various	1 person I'm thinking of, then I would be 2 surprised if she doesn't have that. 3 Q. Is Dr. Egilman a fellow of the 4 American College of Epidemiology? 5 A. I have no idea. 6 Q. Has Dr. Egilman ever taught 7 epidemiology? 8 A. I have no idea. 9 Q. Has Dr. Egilman ever been a cancer 10 prevention fellow at NCI? 11 A. I -- I'm not aware of it. 12 Q. Does Dr. Egilman have any 13 professional experience in gynecological 14 cancers prior to being a witness in this 15 litigation? 16 A. I'm unaware. 17 Q. Are you aware that Dr. Goodman was 18 a cancer prevention fellow at NCI? 19 A. If it's the person that I'm 20 thinking of, then it wouldn't surprise me if 21 she had all of those pieces on her CV, yeah. 22 Q. NCI is the National Cancer 23 Institute, right? 24 A. That's correct. 25 Q. Are you familiar with that

<p>1 organization?</p> <p>2 A. Yes, I have some familiarity with</p> <p>3 it.</p> <p>4 Q. Is it a respected organization?</p> <p>5 MS. PARFITT: Objection. Asked and</p> <p>6 answered.</p> <p>7 THE WITNESS: Well, it's an</p> <p>8 enormous beast. It's like asking if the</p> <p>9 United States has any respect.</p> <p>10 Yes, NCI is a respected</p> <p>11 organization; and it's main job is to do</p> <p>12 research and to fund research.</p> <p>13 MS. DAVIDSON: Okay. We can take</p> <p>14 this paper down.</p> <p>15 BY MS. DAVIDSON:</p> <p>16 Q. Dr. Siemiatycki, are you aware that</p> <p>17 ovarian cancer rates have fallen significantly</p> <p>18 over the last 20 to 30 years?</p> <p>19 A. I'm aware that they've declined.</p> <p>20 Q. Do you --</p> <p>21 A. But I don't know about</p> <p>22 significantly. I don't know what you mean by</p> <p>23 that, but they've -- yes.</p> <p>24 Q. How much did they decline?</p> <p>25 A. Sorry?</p>	<p>Page 134</p> <p>1 for public health that the incidence of ovarian</p> <p>2 cancer fell precipitously over 30 years, right?</p> <p>3 A. Yes. If it's completely true, then</p> <p>4 I think it's great.</p> <p>5 Q. During the 30 years when ovarian</p> <p>6 cancer rates declined precipitously, did that</p> <p>7 follow a precipitous decline in talcum powder</p> <p>8 use?</p> <p>9 MS. PARFITT: Objection. Form.</p> <p>10 THE WITNESS: I don't know. You</p> <p>11 know, I guess -- I don't know if anyone</p> <p>12 has done an analysis of time trends in</p> <p>13 talcum powder use and in talcum powder</p> <p>14 composition, and that's what would be</p> <p>15 required.</p> <p>16 I believe -- I hope I'm not making</p> <p>17 this up, but I believe there has been some</p> <p>18 decline in use of talcum powder by women.</p> <p>19 And there have certainly been changes in</p> <p>20 composition of talcum powder since the</p> <p>21 1980s. There's been less mineral and more</p> <p>22 of other products that have the same</p> <p>23 effect.</p> <p>24 So there's a possibility that some</p> <p>25 of that has played in to changing</p>
<p>1 Q. Do you know how much they declined?</p> <p>2 A. I don't.</p> <p>3 Q. Are you aware that the incidence</p> <p>4 rate for new cases of ovarian cancer fell from</p> <p>5 14.9 per 100,000 people to 9.6 between 1992 and</p> <p>6 2019?</p> <p>7 MS. PARFITT: Objection. Asked and</p> <p>8 answered.</p> <p>9 THE WITNESS: I'm not aware of</p> <p>10 those numbers.</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. Do you have an opinion as to why</p> <p>13 those numbers have fallen?</p> <p>14 A. Whenever there are changes in</p> <p>15 incidence of a disease, one of the first</p> <p>16 questions that should be asked is whether there</p> <p>17 have been any changes in diagnostic habits of</p> <p>18 physicians or pathologists in regard to the</p> <p>19 disease in question.</p> <p>20 So -- but having said that, I have</p> <p>21 no idea and no reason to believe that there</p> <p>22 have been changes in diagnostic practices or</p> <p>23 criteria over that period of time that would</p> <p>24 explain such an apparent decline.</p> <p>25 Q. You would agree that's good news</p>	<p>Page 135</p> <p>1 incidence rates of ovarian cancer, but I</p> <p>2 wouldn't affirm that.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. What's your basis for saying that</p> <p>5 the composition of talcum powder has changed</p> <p>6 since the 1980s?</p> <p>7 A. Well, I believe that the companies,</p> <p>8 I think Johnson &amp; Johnson and other companies,</p> <p>9 have proclaimed and offered alternatives to the</p> <p>10 mineral talc in their products and more of</p> <p>11 the -- what's it called -- corn -- sorry,</p> <p>12 sometimes words fall out of my vocabulary</p> <p>13 box -- corn starch -- no. It's corn starch,</p> <p>14 yeah.</p> <p>15 So that there's been an increase</p> <p>16 since about the 1980s -- at least that's what I</p> <p>17 read. I mean, I haven't done the research into</p> <p>18 this firsthand research; but everything I've</p> <p>19 read -- and I don't think it's contested -- is</p> <p>20 that there's been a shift away from the mineral</p> <p>21 talc to corn starch and maybe other products as</p> <p>22 well, other substances as well that have</p> <p>23 similar cosmetic effects as talc does.</p> <p>24 Q. What's the latency period for</p> <p>25 ovarian cancer?</p>

<p style="text-align: right;">Page 138</p> <p>1 A. Well, as with any cancer, there's 2 no single number; but I think the range -- and 3 there -- it's hard to -- especially when you 4 don't have a good grasp on the important risk 5 factors for the disease, it's difficult to 6 affirm with any degree of certainty what the 7 latency period is.</p> <p>8 But the general feeling is that for 9 epithelial solid tumors, a range from 10 to 20 10 or 25 years is a reasonable estimate of what 11 the latency period is.</p> <p>12 But with cancer's, there may be 13 early-stage risk factors, later-stage risk 14 factors that -- that come into play. And these 15 influence latency periods in different ways. 16 But --</p> <p>17 Q. Have you done any sort of analysis 18 to determine whether there was a drop in the 19 use of talcum powder with the appropriate 20 latency that it would have affected the drop in 21 ovarian cancer rates over the last 30 years, or 22 are you just speculating?</p> <p>23 MS. PARFITT: Objection. Form. 24 THE WITNESS: I have not done an 25 analysis of this topic.</p>	<p>1 You speculated, correct? 2 You were talking about how women 3 have moved away -- possibly have moved away 4 from talcum powder toward other compositions. 5 At first, you said it was other compositions of 6 talc, but now I think you mean other products 7 all together; and maybe that relates to the 8 precipitous decline in ovarian cancer.</p> <p>9 My question is: You don't have any 10 actual evidence for that, correct?</p> <p>11 MS. PARFITT: Objection. Form. 12 THE WITNESS: I mean, I think there 13 are pieces -- I haven't produced any 14 evidence of that, but I've read that 15 there's -- I've seen evidence that there's 16 a decline in usage of talcum powder. 17 I've seen that there have been 18 changes over time in composition of the 19 products that are commonly called talcum 20 powder. 21 And so but -- and there -- it's 22 widely accepted that there is the latency 23 period roughly between 10 and 20 years or 24 so, maybe 5 to 25 years if you want to 25 broaden it, which -- and for between</p>
<p style="text-align: right;">Page 139</p> <p>1 BY MS. DAVIDSON: 2 Q. So fair to say that you're 3 speculating? 4 MS. PARFITT: Objection. Form. 5 THE WITNESS: Sorry. I spoke for 6 about five minutes. I'm not sure which 7 part of it you are addressing. 8 You're saying it's all -- 9 everything I've said is speculation? 10 Is that what your -- asking me? 11 BY MS. DAVIDSON: 12 Q. You speculated that maybe -- well, 13 first you said changes in talcum powder 14 composition, but then I think you said a move 15 away from talcum powder could have affected 16 precipitous decline in ovarian cancer rates. 17 I'm asking you: Is that 18 speculation? 19 MS. PARFITT: Objection. Form. 20 THE WITNESS: If it's speculation 21 that there's been a drop -- a decline in 22 talcum powder use? 23 BY MS. DAVIDSON: 24 Q. That would -- Doctor, it's not a 25 difficult question.</p>	<p>1 exposure and onset of disease. 2 Latency period is a very 3 complicated -- it's an easy term to use, 4 but what it actually means is not obvious. 5 So I don't want to -- I hesitate answering 6 your question about latency period partly 7 for that question. But if you want me to, 8 I'll get into why it is so complicated. 9 BY MS. DAVIDSON: 10 Q. Dr. Siemiatycki, could you try to 11 stick to the question. 12 My question is: Sitting here 13 today, do you have any evidence that the 14 decline between 1990 and 2020 in ovarian cancer 15 rates relates to a decline in talcum powder 16 use? 17 A. Okay. 18 MS. PARFITT: Objection. Form. 19 THE WITNESS: If that -- if that is 20 your question, then the answer is: I 21 don't have evidence for that. 22 BY MS. DAVIDSON: 23 Q. Thank you. 24 Doctor, you criticize in your 25 report a paper called Micha 2022.</p>

1            Do you recall that? 2    A. Yes. Let's -- let's find it. 3            MS. PARFITT: Page 78, just to move 4            this along. 5            MS. DAVIDSON: Micha '22, what -- 6            Noah, we're marking that as exhibit what? 7            MR. EPSTEIN: That would be 8            Exhibit 10. 9            MS. DAVIDSON: Okay. 10           (Whereupon, Defendant's 11           Exhibit D10, Paper entitled, "Talc powder 12           and ovarian cancer: What is the 13           evidence?" By John P. Micha, et al., was 14           marked for identification.) 15           MR. EPSTEIN: I'll put that in chat 16           right you. 17           MS. DAVIDSON: Great. With that 18           new heading. 19           MR. EPSTEIN: Yes. 20   BY MS. DAVIDSON: 21           Q. "Talc powder and ovarian cancer: 22           What is the evidence?" John Micha. 23           Dr. Siemiatycki, do you know who 24           John Micha is? 25           MS. PARFITT: We are just trying	Page 142	1            disclose." 2            Do you see that? 3    A. I see that. 4            Q. Are you aware that Susan Berg, 5            whose family sponsored this paper, was actually 6           a plaintiff in talc litigation? 7            MS. PARFITT: Objection. 8            Completely misstates the evidence who 9            Susan Berg was. 10           THE WITNESS: I'm unaware of any of 11           this. 12   BY MS. DAVIDSON: 13           Q. Okay. And in contrast to 14           Dr. Micha, Dr. Egilman who responded to this 15           paper does have a conflict of interest, 16           correct? 17           MS. PARFITT: Objection. Form. 18           THE WITNESS: I'm not aware of 19           that. 20   BY MS. DAVIDSON: 21           Q. You're not aware that Dr. Egilman 22           has a conflict of interest? 23           A. Correct. Unless it's -- I'm not 24           aware of it. It might have been in the paper. 25           He might have stated it. I'll look at the	Page 144
1            to grab -- 2            MS. DAVIDSON: While you're looking 3            for the paper, I'm just asking if he knows 4            who John Micha is. 5            THE WITNESS: I don't know. 6   BY MS. DAVIDSON: 7            Q. Did you do any investigation as to 8            whether Dr. Micha had any conflicts of interest 9            here? 10           A. I don't know who he is, and I 11            didn't do any investigations. 12           Q. Got it. Did you read who funded 13            the paper? 14           A. No, I didn't. 15           Q. I'll read it to you. "This study 16            was funded by the Women's Cancer Research 17            Foundation, the family of Susan Berg, and the 18            family of Joan and Len Rullo in memory of 19            Elizabeth Johnson." 20           Do you see that? 21           That's on the last page, funding. 22           A. Yes, I see -- on the last page -- 23           oh, yes. 24           Q. "The authors have no relevant 25            financial or nonfinancial interests to	Page 143	1            paper if you'd like. 2            Q. Dr. Siemiatycki, is serving in this 3            litigation a conflict of interest that should 4            be disclosed in the letter? 5            A. It depends what the letter is 6            about. 7            Q. I don't understand. When you say 8            Dr. Egilman didn't have a conflict of interest, 9            are you aware that Dr. Egilman is a plaintiff's 10           expert in talc litigation? 11           A. I'm -- I'm unaware of that. 12           Q. I see. Okay. We can continue. 13           I'd like to turn to -- back to 14           Exhibit 6, which is your expert report, and I'd 15           like to go to your discussion of Wentzensen 16           paper. 17           MS. PARFITT: One moment. 18           THE WITNESS: Which one is it? 19           MS. PARFITT: The Wentzensen 2021. 20           Right, Jessica? 21           MS. DAVIDSON: I'm just talking 22           about -- let's -- Noah, can you please put 23           up Exhibit 5 on the screen, page 76 of 24           Dr. Siemiatycki's Second Amended Expert 25           Report?	Page 145

<p style="text-align: right;">Page 146</p> <p>1        MR. EPSTEIN: Yes. That's  2        Exhibit 6, correct, Jessica?  3        MS. DAVIDSON: Oh, sorry. Sorry.  4        Exhibit 6. Confusion.  5        MR. EPSTEIN: It should be up now.  6        THE WITNESS: I have -- I have the  7        report in front of me.  8 BY MS. DAVIDSON:  9        Q. I'd like to ask you a question  10      about your report.  11        You say here, quote, "They debunked  12      the notion expressed by Goodman 2020, Lynch  13      2023, and others that cohorts studies as a  14      class are more valid than case control  15      studies."  16        Do you see that?  17        A. I see that.  18        Q. Can you show me where in the paper  19      they debunk that?  20        A. I'll have to look at the paper.  21      It'll take me a few minutes.  22        So I'm looking at the article --  23        Q. Uh-huh.  24        A. -- and on page 4 of the version  25      that I have, but it would be on the -- can you</p>	<p style="text-align: right;">Page 148</p> <p>1        which is not true.  2        And that's the point I was trying  3      to make only that they made -- they  4      debunked the notions that these are  5      generic general truths that cohort studies  6      are superior to case control studies.  7        It's the specifics of each type of  8      study -- of each study that determines  9      it's quality, not whether it fits under  10     the umbrella of cohort or case control.  11 BY MS. DAVIDSON:  12        Q. Do Goodman 2020 and Lynch 2023  13      state that cohort studies have no limitations?  14        A. Do they state what?  15        Q. That cohort studies have no  16      limitations.  17        A. I'll have to go through the two  18      studies to see where -- what I'm contrasting  19      where --  20        Q. I'm just asking you whether you  21      recall. Obviously we don't have time to go  22      through those two studies.  23        Do you recall whether these two  24      papers state that cohort studies have no  25      limitations?</p>
<p style="text-align: right;">Page 147</p> <p>1      find page 4?  2      Q. Sure.  3      A. It's 4.2 called "Study Designs."  4      Q. Uh-huh.  5      A. There are a few paragraphs there  6      that contrast the strengths and weaknesses of  7      case control versus cohort studies.  8      Q. Uh-huh.  9      A. And the --  10     Q. Can you just point me to the  11      sentence that, quote, "debunks the notion that  12      cohort studies as a class are more valid"?</p> <p>13     MS. PARFITT: Objection to the  14      question. I think he was in the middle of  15      trying to deliver a response.</p> <p>16     THE WITNESS: Yeah, yeah. I don't  17      think I said there is a sentence that  18      debunks it. It's this entire section.</p> <p>19     The entire section, the effect of  20      itself to show that there are strengths  21      and weaknesses of both types of designs.  22      And that's -- and by contrast with some  23      other opinions that make the blanket  24      statement that cohort studies as a class  25      are superior to case control studies,</p>	<p style="text-align: right;">Page 149</p> <p>1      A. I don't recall such statements; but  2      if I put this --  3      Q. Okay.  4      A. -- into this report I probably --  5      it was probably based on the impression that I  6      got by reading the entirety of the article that  7      they were downplaying the validity of case  8      control studies by contrast with cohort  9      studies. So it's based on an impression of the  10     entire articles, not a specific sentence.  11     Q. In fact, O'Brien and Wentzensen  12      published the most comprehensive meta-analysis  13      of cohort studies, correct?  14     MS. PARFITT: Objection. Form.  15     THE WITNESS: Sorry. O'Brien  16      published the most comprehensive -- sorry.  17      Can you repeat that.  18 BY MS. DAVIDSON:  19      Q. Isn't it true that O'Brien and  20      Wentzensen themselves published the most  21      comprehensive meta-analysis of cohort studies?  22      A. Of the available cohort studies on  23      talc and ovarian cancer, correct.  24      Q. That's what we're discussing today.  25      Thank you.</p>

<p>1 If you go few lines down in your 2 report, you say that, "Women with intact 3 reproductive systems and used -- that the 4 authors found that women with intact 5 reproductive systems and used talcum powder had 6 particularly high risks of ovarian cancer."</p> <p>7 Do you see that language?</p> <p>8 MS. PARFITT: And, again, he was 9 going to the article.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. We're on page 76 of your report.</p> <p>12 MS. PARFITT: 76.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. It says, "Women with intact 15 reproductive systems and used talcum powder had 16 particularly high risks of ovarian cancer."</p> <p>17 Do you see that language, 18 "particularly high"?</p> <p>19 A. Oh, yes. I see that now.</p> <p>20 Q. Can you show me where in the 21 Wentzensen paper it says that, "Women with 22 intact reproductive systems had particularly 23 high risks of ovarian cancer"?</p> <p>24 THE WITNESS: Wentzensen study.</p> <p>25 MS. PARFITT: I'm handing him the</p>	Page 150	<p>1 A. No. 2 Q. That sentence says that 3 epidemiological studies have found that women 4 with talc -- with intact reproductive systems 5 and who used talcum powder have particularly 6 high risks of ovarian cancer?</p> <p>7 MS. PARFITT: He was trying to 8 answer.</p> <p>9 Go ahead, Doctor.</p> <p>10 THE WITNESS: So if I carry on 11 reading in the Wentzensen paper, it says, 12 "As described below, many of these 13 existing studies have attempted to look at 14 this in some way. However, most were 15 unable to do so with a clear temporal 16 sequence between hysterectomy, tubal 17 ligation, and powder use. For example, it 18 may not be possible to know whether talc 19 was used prior to hysterectomy and tubal 20 ligation or what a women's combined talc 21 use status was."</p> <p>22 So that's indicating that the -- 23 that there's been insufficient research 24 to -- to sort of lock up this topic, 25 but --</p>	Page 152
<p>1 Wentzensen study.</p> <p>2 THE WITNESS: So in -- on page -- 3 I'm looking for a page number. I think 4 page 7 --</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Uh-huh.</p> <p>7 A. -- above Table 3 --</p> <p>8 Q. Uh-huh.</p> <p>9 A. -- there's a Section 5.3. It says, 10 "Patients of genital powder use and ovarian 11 cancer by tubal ligation and hysterectomy 12 and" --</p> <p>13 Q. I'm there.</p> <p>14 A. Okay. So a few lines down it 15 says -- well, "As such, it would make sense 16 that women who did not have uterus, either i.e., 17 hysterectomy or those who had blocked fallopian 18 tubes, would have a markedly reduced risk of 19 developing the disease as a direct consequence 20 of talc use."</p> <p>21 There are a few other sentences 22 around it, but that sentence captures, I think, 23 the meaning of my sentence that you --</p> <p>24 Q. So that sentence says that the 25 studies have found --</p>	Page 151	<p>1 BY MS. DAVIDSON:</p> <p>2 Q. But that's not what you say, 3 Doctor.</p> <p>4 What you say in your report is 5 that, "The data tend to show that women with 6 intact reproductive systems and used talcum 7 powder have particularly high risks of ovarian 8 cancer."</p> <p>9 I'm trying to understand -- I've 10 got the report in front of me, the papers at -- 11 the paper in front of me too.</p> <p>12 I'm trying to understand where from 13 Wentzensen do you drive that the authors 14 believed the data show that women who used 15 talcum powder and have intact reproductive 16 systems have particularly high risks?</p> <p>17 MS. PARFITT: Jessica, you may not 18 have heard. He was still talking when you 19 started to talk again. So please, let him 20 finish.</p> <p>21 And I realize this is very 22 difficult and challenging being remote, 23 but he was actually talking.</p> <p>24 You're going to have to raise your 25 voice as well, Doctor.</p>	Page 153

<p style="text-align: right;">Page 154</p> <p>1        THE WITNESS: Yeah.</p> <p>2        MS. PARFITT: But please continue</p> <p>3        your thought and opinion.</p> <p>4        THE WITNESS: So as such, it would</p> <p>5        make sense they say that women who did not</p> <p>6        have intact reproductive systems would --</p> <p>7        would have a reduced risk of developing.</p> <p>8        So if it was blocked, there would</p> <p>9        be a reduced risk of talc particles</p> <p>10       reaching the ovaries. And my sentence</p> <p>11       says -- so with the intact reproductive</p> <p>12       systems and the lack of blockage from --</p> <p>13       from any surgical interventions, that</p> <p>14       there would be -- oh, particularly high</p> <p>15       risks.</p> <p>16       Yes. So with intact reproductive</p> <p>17       systems, there would be greater chance of</p> <p>18       particles reaching the ovaries.</p> <p>19       BY MS. DAVIDSON:</p> <p>20       Q.    What you say here is that, "The few</p> <p>21       studies that have data tend to show that women</p> <p>22       with intact reproductive systems had</p> <p>23       particularly high risks."</p> <p>24       "The few studies that had data."</p> <p>25       Where do Wentzensen and O'Brien say</p>	<p style="text-align: right;">Page 156</p> <p>1        right?</p> <p>2        A.    Sorry. Can you -- can you show me</p> <p>3        where -- where is that last -- yes. I'm in the</p> <p>4        conclusions section, which is --</p> <p>5        MS. DAVIDSON: Noah, can you put</p> <p>6        the conclusion of Wentzensen up?</p> <p>7        MR. EPSTEIN: Yes. I'm on it right</p> <p>8        now.</p> <p>9        MS. PARFITT: Thanks, Noah.</p> <p>10       BY MS. DAVIDSON:</p> <p>11       Q.    Okay. We're in the second</p> <p>12       paragraph of the conclusion.</p> <p>13       MS. DAVIDSON: Blow it up, the</p> <p>14       paragraph that starts with "Taken</p> <p>15       together. Blow it up, Noah.</p> <p>16       MR. EPSTEIN: I don't know how to</p> <p>17       do it through Zoom. I'm sorry.</p> <p>18       MS. DAVIDSON: Okay.</p> <p>19       BY MS. DAVIDSON:</p> <p>20       Q.    Anyway the authors say, "Taken</p> <p>21       together, the epidemiological data from case</p> <p>22       control studies and cohort studies suggests</p> <p>23       that there may be a small positive association</p> <p>24       between genital powder use and ovarian cancer</p> <p>25       which may be limited to women with patent</p>
<p style="text-align: right;">Page 155</p> <p>1        that the few studies that had data tend to show</p> <p>2        particularly high risks of ovarian cancer?</p> <p>3        A.    So the article says they were</p> <p>4        unable to demonstrate this with a clear</p> <p>5        temporal sequence. This article is not -- does</p> <p>6        not make the bold statement that I make in</p> <p>7        describing the Wentzensen article.</p> <p>8        Q.    Doctor --</p> <p>9        A.    Yes.</p> <p>10       Q.    -- in fact, don't they say only</p> <p>11        there may be a small positive association</p> <p>12        between genital powder use and ovarian cancer,</p> <p>13        which may be limited to women with patent</p> <p>14        reproductive tracts?</p> <p>15        Isn't that what they say on page 8?</p> <p>16        A.    Sorry. Can you --</p> <p>17        MS. PARFITT: Page 8.</p> <p>18        THE WITNESS: Yeah.</p> <p>19        BY MS. DAVIDSON:</p> <p>20        Q.    In their conclusion, the authors</p> <p>21        state, "There may be a small positive</p> <p>22        association between genital powder use and</p> <p>23        ovarian cancer, which may be limited to women</p> <p>24        with patent reproductive tracts."</p> <p>25        That's what they actually say,</p>	<p style="text-align: right;">Page 157</p> <p>1        reproductive tracts."</p> <p>2        I read that correctly, right,</p> <p>3        Dr. Siemiatycki?</p> <p>4        A.    Yes.</p> <p>5        Q.    So rather than saying anything</p> <p>6        about a particularly high risk, the authors</p> <p>7        actually say "small positive association,"</p> <p>8        right?</p> <p>9        MS. PARFITT: Objection. Form.</p> <p>10       THE WITNESS: So terms like "small"</p> <p>11        and "high" are not technically defined. I</p> <p>12        mean, they don't have -- carry with them</p> <p>13        any implication of what exactly that means</p> <p>14        in terms of the magnitude. And whether</p> <p>15        you call something -- an effect large or</p> <p>16        small is rather subjective, and it doesn't</p> <p>17        mean the same thing in all contexts.</p> <p>18        So yes, they use the words "small</p> <p>19        positive association" here; but for many</p> <p>20        associations that we have in biomedicine</p> <p>21        and epidemiology and even in talc -- in</p> <p>22        ovarian cancer epidemiology, there are</p> <p>23        effects which have relative risks much</p> <p>24        smaller than the relative risks shown for</p> <p>25        ovarian -- for talc and ovarian cancer</p>

<p style="text-align: right;">Page 158</p> <p>1 that are considered quite strong effects.      2 There are very genetic markers that      3 have associations with ovarian cancer      4 where the relative risks are in the order      5 of 1.05 or something like that. And, you      6 know, air pollution has that affect on      7 lung cancer.      8 And so the descriptor, the word      9 that you use to describe the magnitude of      10 a relative risk is somewhat subjective and      11 context dependent.      12 So if I understand your question      13 correctly, you are trying to show that      14 whereas they use the word "small" to      15 describe the association, I used the      16 word -- let me find it again.      17 BY MS. DAVIDSON:      18 Q. "Particularly high risk," Doctor.      19 I'm trying to --      20 A. Yeah.      21 MS. PARFITT: Let him finish.      22 THE WITNESS: What I mentally      23 "particularly high" was particularly high      24 compared with women with surgical      25 interventions to interrupt the -- the</p>	<p style="text-align: right;">Page 160</p> <p>1 BY MS. DAVIDSON:      2 Q. The authors did not note that,      3 correct?      4 MS. PARFITT: Objection. Asked and      5 answered.      6 THE WITNESS: Well, I'll look      7 through the article again to see what      8 triggered my interpretation that they had      9 made such an inference.      10 BY MS. DAVIDSON:      11 Q. Okay. Doctor, if you look at the      12 top of page 9 of Wentzensen, the authors state,      13 "Independent of the underlying cause, this      14 association between powder use and ovarian      15 cancer risk is weak. The low relative risk      16 translates to a very low risk increase."      17 Do you see that?      18 A. I see that.      19 Do you want me to comment on it?      20 Q. No. I'm just asking if you see      21 that language.      22 A. I see it.      23 Q. This paragraph 2 does not have any      24 reference or notation to a particularly high      25 risk, correct?</p>
<p style="text-align: right;">Page 159</p> <p>1 potential entry of talc particles.      2 And so in the contrast, I can't      3 remember what it is; but if I remember, if      4 the overall relative risk is, you know, in      5 the order of 1.3 for talc and ovarian      6 cancer, it might be that that -- that      7 combines a relative risk of 1.4 or 1.5 for      8 women with intact reproductive tracts      9 compared to maybe 1.1 or 1.2 for women      10 without.      11 And so that's the contrast --      12 that's what I meant by "particularly," by      13 contrast with women without intact      14 reproductive tracts, and that's -- so the      15 descriptor "high" was in the comparison of      16 the two groups of women.      17 BY MS. DAVIDSON:      18 Q. Dr. Siemiatycki, in fact, the      19 authors did not note that women with intact      20 reproductive systems who used talcum powder had      21 particularly high risks of ovarian cancer,      22 right?      23 MS. PARFITT: Objection. Asked and      24 answered.      25</p>	<p style="text-align: right;">Page 161</p> <p>1 MS. PARFITT: Objection. Asked and      2 answered.      3 THE WITNESS: Correct.      4 MS. DAVIDSON: Thank you. Let's go      5 off the record.      6 (Whereupon, a lunch was taken.)      7 MS. DAVIDSON: Let's mark as      8 Exhibit 11 "Douching and Genital Talc Use:      9 Patterns of Use and Reliability of      10 Self-reported Exposure," first author      11 O'Brien.      12 MS. PARFITT: It was hard to hear      13 you, Jessica. I'm sorry.      14 MS. DAVIDSON: It's called      15 "Douching and Genital Talc Use: Patterns      16 of Use and Reliability of Self-reported      17 Exposure," first author O'Brien.      18 MS. PARFITT: Give us one moment.      19 MS. DAVIDSON: I'm sorry?      20 MS. PARFITT: Give us one moment.      21 MS. DAVIDSON: No problem. We'll      22 put it up on the screen.      23      24      25</p>

<p style="text-align: right;">Page 162</p> <p>1 (Whereupon, Defendant's 2 Exhibit D11, Paper entitled, "Douching and 3 Genital Talc Use: Patterns of Use and 4 Reliability of Self-reported Exposure," by 5 Katie M. O'Brien, et al., was marked for 6 identification.)</p> <p>7 MR. TISI: I'm just trying to give 8 him --</p> <p>9 MS. PARFITT: Jessica, it's the 10 "Perineal talc use and" --</p> <p>11 MR. TISI: No. It's the Patterns 12 and Reliability the self-exposure.</p> <p>13 MS. DAVIDSON: "Douching and 14 Genital Talc Use: Patterns of Use and 15 Reliability of Self-reported Exposure."</p> <p>16 MR. TISI: Hold on. Let me see if 17 I can get another copy. All I have is the 18 preprint. Let me see if I have another 19 copy.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Dr. Wentzensen [sic], have you read 22 this article before?</p> <p>23 MS. PARFITT: You mean 24 Dr. Siemiatycki.</p> <p>25 MS. DAVIDSON: Oh, I'm sorry.</p>	<p style="text-align: right;">Page 164</p> <p>1 parameters of talc use and douching in 2 that population.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. Do you recall that the authors were 5 looking at questions of recall bias?</p> <p>6 A. Yes. It's in the title, so I 7 recall that.</p> <p>8 Q. And what do the authors determine; 9 do you recall?</p> <p>10 A. I don't recall.</p> <p>11 Q. Okay. Dr. Siemiatycki --</p> <p>12 A. Yes.</p> <p>13 Q. -- the authors state, "If historic 14 use cannot be accurately recalled, measurement 15 error can bias effect estimates, especially if 16 recall reliability differs by outcome status."</p> <p>17 Do you agree with that statement?</p> <p>18 A. So I didn't catch all of what you 19 said.</p> <p>20 Could you --</p> <p>21 Q. It's right here on page 1.</p> <p>22 A. Okay.</p> <p>23 Q. It's up on the screen.</p> <p>24 A. Yeah.</p> <p>25 Q. On the right-hand, the last</p>
<p style="text-align: right;">Page 163</p> <p>1 Yeah. I'm definitely running out of steam 2 here. I'm so sorry.</p> <p>3 MS. PARFITT: No worries. No 4 worries. No worries.</p> <p>5 MS. DAVIDSON: Fortunately, no 6 contagion on Zoom.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Dr. Siemiatycki, have you read this 9 article before?</p> <p>10 A. I think I have.</p> <p>11 Q. What is does this article address?</p> <p>12 A. Well, patterns of use and 13 reliability of self-reported exposure of 14 douching and genital talc use by women.</p> <p>15 Q. Do you know what the paper looks 16 at?</p> <p>17 MS. PARFITT: Objection. Form.</p> <p>18 THE WITNESS: I'm just -- I'm just 19 starting to look at the preprint version. 20 It's not one that I've looked at recently, 21 so it will just take me a minute to 22 refresh my memory about this one.</p> <p>23 Oh, yes. It's from the 24 Sister Study. And it's kind of a 25 descriptive presentation of various</p>	<p style="text-align: right;">Page 165</p> <p>1 sentence of the second paragraph on the right. 2 I'll read it again.</p> <p>3 "If historic use cannot be 4 accurately recalled, measurement error can bias 5 effect estimates, especially if recall 6 reliability differs by outcome status."</p> <p>7 Do you agree with that statement?</p> <p>8 A. Yes. I still haven't found the 9 sentence on the page, but I agree with that 10 statement.</p> <p>11 Q. This study looked at recall bias 12 with respect to ever use and never use, 13 correct?</p> <p>14 A. I guess so. Again, this article is 15 not fresh in my memory and --</p> <p>16 Q. Okay.</p> <p>17 A. -- I'm -- I'm just looking at --</p> <p>18 Q. Could -- my question is: Could 19 recall bias also affect reporting of the 20 frequency of use of a product?</p> <p>21 A. Yes, it could.</p> <p>22 Q. So if you -- do you recall whether 23 O'Brien's paper found that there may be 24 over-reporting of talc use among those with a 25 history of ovarian cancer?</p>

<p style="text-align: right;">Page 166</p> <p>1 MS. PARFITT: And, Jessica, for 2 clarity, are you still talking about this 3 douching paper or a different O'Brien 4 paper, just for clarity?</p> <p>5 MS. DAVIDSON: I'm talking about 6 this paper, I believe.</p> <p>7 MS. PARFITT: Okay. No. That's 8 fine. That's fine.</p> <p>9 It was really faint, Jessica. I'm 10 sorry. I know you don't -- you're not 11 feeling well, but you're really faint. 12 Okay.</p> <p>13 BY MS. DAVIDSON:</p> <p>14 Q. Dr. Siemiatycki?</p> <p>15 A. Yes.</p> <p>16 Q. Do the authors of this paper find 17 that there may be over-reporting of talc use 18 among those with a history of ovarian cancer?</p> <p>19 A. You know, I -- I can't -- I can't 20 remember, to be honest. I can't remember 21 this --</p> <p>22 Q. Okay.</p> <p>23 A. -- particularly well.</p> <p>24 Q. Okay. That's fair.</p> <p>25 Do you recall the author saying</p>	<p style="text-align: right;">Page 168</p> <p>1 bias in that; and I had a discussion of the 2 possible impact that it might have. 3 So I felt -- I feel like I already 4 dealt with this issue in my report. I -- I 5 don't know that this -- this publication 6 changed anything for my report.</p> <p>7 MS. DAVIDSON: Okay. I'd like to 8 mark as Exhibit 12 a paper entitled, "Use 9 of personal care product mixtures and 10 incident hormone-sensitive cancers in the 11 Sister Study: A U.S.-wide prospective 12 cohort," first author Chang. (Whereupon, Defendant's 13 Exhibit D12, Paper entitled, "Use of 14 personal care product mixtures and 15 incident hormone-sensitive cancers in the 16 Sister Study: A U.S.-wide prospective 17 cohort," by Che-Jung Chang, et al., was 18 marked for identification.)</p> <p>19 THE WITNESS: C-H-I-A-N-G-E.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. C-H-A-N-G.</p> <p>22 A. I'm getting it. It will just take 23 a second before we find it.</p> <p>24 Q. Does the paper name sound familiar</p>
<p style="text-align: right;">Page 167</p> <p>1 that, "Recall bias is potentially driving some 2 of the previous observed differences in effect 3 estimates between studies collecting genital 4 powder exposure status retrospectively versus 5 prospectively"?</p> <p>6 A. So I don't recall that.</p> <p>7 Q. Okay.</p> <p>8 A. But I don't disagree that it's 9 potentially true.</p> <p>10 Q. Okay.</p> <p>11 A. The qualifier potentially's the key 12 word in -- in that sentence.</p> <p>13 Q. Did you include a discussion of 14 this paper in your -- in your report?</p> <p>15 A. Of this paper?</p> <p>16 Q. Uh-huh.</p> <p>17 A. You know, I don't remember if I did 18 or not.</p> <p>19 Q. Okay.</p> <p>20 A. I didn't think that it moved of the 21 dial in any way compared to what I already had 22 in the paper. You know, I had a section in my 23 paper -- in my report about different kinds of 24 biases that can affect different kinds of 25 epidemiologic studies, and I included reporting</p>	<p style="text-align: right;">Page 169</p> <p>1 to you?</p> <p>2 A. I'm sorry?</p> <p>3 Q. Does the paper name sound familiar 4 to you?</p> <p>5 A. Yes, vaguely; but again, not fresh 6 in my mind.</p> <p>7 Q. Do you recall when you read it?</p> <p>8 A. Sorry. Did you say -- did you ask 9 something?</p> <p>10 Q. Do you recall when you read this 11 paper?</p> <p>12 A. No, I don't, not right now. Not 13 before having seen it. If you can hang on for 14 a couple of minutes, I think we're looking for 15 it.</p> <p>16 THE WITNESS: Is it missing?</p> <p>17 MS. DAVIDSON: We'll put it up on 18 the screen, Noah.</p> <p>19 MS. PARFITT: If you can go -- if 20 you could go ahead and -- thank you very 21 much -- put it up.</p> <p>22 MS. DAVIDSON: I believe this paper 23 was in the materials you sent us in the 24 Dropbox, Michelle, correct?</p> <p>25 MS. PARFITT: Correct. That's</p>

<p>1 correct, yes.</p> <p>2 MS. DAVIDSON: So I'm asking the 3 doctor when he read it.</p> <p>4 MS. PARFITT: Yes. The distinction 5 we were making, he's got three binders of 6 articles here; and it is not in his 7 binder. I don't know if it's in the 8 miscellaneous materials that we got.</p> <p>9 THE WITNESS: I don't remember when 10 I looked at this. It wasn't an important 11 paper in my evaluation.</p> <p>12 BY MS. DAVIDSON:</p> <p>13 Q. Does this paper report a risk 14 estimate for exposure to perineal talc use and 15 the development of ovarian cancer?</p> <p>16 MS. PARFITT: Objection. Form.</p> <p>17 If you want to show him what 18 you're --</p> <p>19 THE WITNESS: I have to read it. I 20 have to read it. I'm sorry. I just 21 don't -- I'm not familiar enough with the 22 article, and I don't remember it very 23 well.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. Okay. It was on your reliance</p>	<p>Page 170</p> <p>1 And if you can point me to where 2 this is an important article with important 3 results, I will certainly consider it if I'm 4 called upon to comment on this again.</p> <p>5 Q. So your testimony is that it's in 6 your materials considered list, but you never 7 actually read it?</p> <p>8 A. I looked at it in some form, maybe 9 looked at the abstract; but, you know, of the 10 hundreds and hundreds of articles I've looked 11 at in abstracts on this topic and other topics 12 in the past year, I can't say that this one 13 stuck out in any way.</p> <p>14 Q. All right. Let's turn to Table S4.</p> <p>15 A. To where?</p> <p>16 Q. Table S4.</p> <p>17 A. Of this article, okay.</p> <p>18 Q. Correct.</p> <p>19 A. I don't have the article in front 20 of me so --</p> <p>21 Q. We're going to put it up on the 22 screen. Don't worry.</p> <p>23 A. Yeah.</p> <p>24 MS. DAVIDSON: We're going to mark 25 Table S4 as Exhibit 13.</p>
<p>1 list, and it came out in 2024.</p> <p>2 So you read it pretty recently, 3 correct?</p> <p>4 MS. PARFITT: It was on materials 5 considered, Jessica, not on reliance.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. Dr. Siemiatycki, this was on your 8 materials considered list and it came out in 9 2024.</p> <p>10 So you read it pretty recently, 11 correct?</p> <p>12 MS. PARFITT: Objection.</p> <p>13 THE WITNESS: Not correct.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. Well, when did you read it?</p> <p>16 A. Well, I don't think I read it. I 17 think I glanced at it, decided it was not 18 important to write up or review. So I --</p> <p>19 Q. How do you decide that a paper's 20 not important to review just by glancing it 21 without reading it in full?</p> <p>22 A. You have to make such decisions 23 when you're reviewing, you know, an enormous 24 volume of material, which ones to go further 25 and dig into and which ones to set aside.</p>	<p>Page 171</p> <p>Page 173</p> <p>1 Noah, it is the Supplemental 2 Table S4.</p> <p>3 MR. EPSTEIN: Yeah. Sorry about 4 that. Let me pull that up.</p> <p>5 MS. DAVIDSON: Let's mark that as 6 Exhibit 13.</p> <p>7 (Whereupon, Defendant's Exhibit 8 D13, Supplemental Table S4, was marked for 9 identification.)</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. Table S4, which we're putting up on 12 the screen, is titled --</p> <p>13 MS. PARFITT: Jessica, it's not up 14 yet, just so you know.</p> <p>15 MS. DAVIDSON: I know. I know. 16 I'm just -- I'm not asking any questions 17 yet. I'm just telling you.</p> <p>18 Table S4, which is being put up on 19 the screen is entitled, "Associations 20 between one-frequency category increase in 21 use of single personal care product and 22 breast, ovarian, and uterine cancer using 23 Cox proportional hazards models."</p> <p>24 Noah, I would like to look at the middle column, which is ovarian cancer.</p>

<p style="text-align: right;">Page 174</p> <p>1 So can you below that up and focus on      2 that.      3 MR. EPSTEIN: I've looked. I don't      4 see a way to blow it up.      5 MS. DAVIDSON: There is a way, but      6 okay.      7 MR. EPSTEIN: Sorry about that.      8 MS. DAVIDSON: Did you ask -- do      9 you ask someone?      10 MR. EPSTEIN: I've reached out to      11 Asher. I haven't heard back.      12 MS. DAVIDSON: Okay. Ask a      13 paralegal.      14 MR. EPSTEIN: Okay.      15 BY MS. DAVIDSON:      16 Q. Looking at the bottom -- we'll all      17 just have to strain our eyes a little.      18 In the bottom middle column, it      19 lists for several hygiene products an adjusted      20 hazard ratio for ovarian cancer.      21 Do you see that?      22 It's also been e-mailed to you in      23 the chat if you want to open it up there.      24 MS. PARFITT: Jessica, I would just      25 object to the extent the doctor has</p>	<p style="text-align: right;">Page 176</p> <p>1 Can you -- are you able to increase      2 it?      3 MR. LYONS: I mean, if you want me      4 to share, I can zoom. So I've got the      5 document if you want me to share.      6 MS. DAVIDSON: Patrick, do you know      7 how to do it?      8 MR. LYONS: Yes.      9 MS. DAVIDSON: Great. Let's have      10 Patrick do it.      11 MR. LYONS: If that will be      12 helpful.      13 MS. DAVIDSON: Yes. That would be      14 amazing, Patrick.      15 So you're going to put -- Patrick,      16 you're going to put up Table S4, the      17 middle table on ovarian cancer.      18 Thank you so much.      19 Michelle, he's useful. You're      20 lucky.      21 Okay. Patrick, we want to go to      22 the bottom. Okay. And then we're looking      23 at -- right. We're looking at adjusted      24 hazard ratios for bath gel, deodorant,      25 douche, mouthwash, shaving scream.</p>
<p style="text-align: right;">Page 175</p> <p>1 already testified. He looked at an      2 abstract. He has not reviewed this      3 article --      4 MS. DAVIDSON: I understand, but      5 I'm -- I'm showing you --      6 MR. TISI: Do you mind if I can go      7 behind him and see if I can download --      8 MS. DAVIDSON: Well, do you guys      9 want to just print -- do you want to go      10 off the record and print this?      11 MR. TISI: We're not in a place      12 where we can do that, Jessica.      13 MS. DAVIDSON: Oh, okay.      14 MR. TISI: I'm seeing if I go to      15 the chat --      16 MS. DAVIDSON: On my computer I'm      17 able to just -- to zoom in.      18 MR. TISI: Yeah. He can't do that      19 unless he downloads the document.      20 MS. DAVIDSON: On my table I can      21 just go on my Zoom, interestingly enough,      22 and just -- on my computer, I can increase      23 it.      24 MR. TISI: Let's see if we can do      25 that.</p>	<p style="text-align: right;">Page 177</p> <p>1 And then if you turn to the next      2 page, talc underarm, talc vaginal, and      3 talc other.      4 BY MS. DAVIDSON:      5 Q. So I'd like to ask you,      6 Dr. Siemiatycki, of these hygiene products,      7 bath gel, deodorant, douche, mouthwash, shaving      8 cream, talc underarm, and talc vaginal, do any      9 show an age-adjusted hazard ratio that's      10 statistically significant with ovarian cancer?      11 MS. PARFITT: Objection to the      12 question.      13 The doctor's testified he has not      14 had a chance to review the entire article,      15 and he has not relied on it for the      16 purposes of this --      17 MS. DAVIDSON: I understand. We're      18 just looking at this table, Michelle.      19 THE WITNESS: Well, from just the      20 table, I wouldn't venture a guess as to      21 how -- what I would think if I saw the      22 whole paper.      23 Just as an example -- this is from      24 the Sister Study, correct?      25 In the original publication of the</p>

<p style="text-align: right;">Page 178</p> <p>1 Sister Study, the published result on      2 perineal use of talc and ovarian cancer      3 showed a relative risk of .73.      4 In the analysis of the Sister Study      5 data by the O'Brien team, they found that      6 the Sister Study data actually showed a      7 relative risk of 1.05.      8 So depending on who did the      9 analysis and how they did the analysis,      10 there's an enormous change in the point      11 estimate.      12 I don't know what this data was      13 based on that you're showing me here in      14 this article. I would need to look at it      15 and understand what -- what subjects it      16 was based on, what subsets of the      17 Sister Study cohort it was based on, what      18 the methods were. So I really can't      19 answer the questions about it.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Dr. Siemiatycki, you're refusing to      22 tell me which of the risk ratios that are      23 listed here are statistically significant?</p> <p>24 MS. PARFITT: Objection. Form.</p> <p>25 THE WITNESS: I could -- I could --</p>	<p style="text-align: right;">Page 180</p> <p>1 A. I see that.      2 Q. Okay. Let's go back down.      3 The adjusted hazard ratio for bath      4 gel is not statistically significant at the      5 95-percent confidence interval, correct?</p> <p>6 MS. PARFITT: Objection. Form.</p> <p>7 THE WITNESS: That's correct.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. And the same is true for deodorant      10 mouthwash, shaving cream, talc underarm, and      11 talc vaginal, correct?</p> <p>12 MS. PARFITT: Objection. Form.</p> <p>13 THE WITNESS: That's correct.</p> <p>14 BY MS. DAVIDSON:</p> <p>15 Q. And the only -- the only      16 statistically significant --</p> <p>17 MS. PARFITT: Jessica, let me --</p> <p>18 THE WITNESS: I don't endorse that      19 those are valid statements.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. I understand. But, you know,      22 that's not my question, with all due respect.</p> <p>23 And you're happy -- I'm happy for      24 you. When Ms. Parfitt questions you, you can      25 go on and on why you don't endorse this paper,</p>
<p style="text-align: right;">Page 179</p> <p>1 BY MS. DAVIDSON:</p> <p>2 Q. If you're refusing, just tell me      3 that.</p> <p>4 MS. PARFITT: Objection to the      5 response.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. I asked you in this paper do the      8 authors -- well, let's start with bath gel.      9 Is the adjusted hazard ratio for      10 bath gel and ovarian cancer statistically      11 significant?</p> <p>12 A. Well, one thing, I don't know which      13 is the adjusted.</p> <p>14 Q. Right here, it says it, 1.06.</p> <p>15 There's --</p> <p>16 A. It doesn't say it on my screen.</p> <p>17 Q. It's at the top of the page,      18 Doctor.</p> <p>19 A. Well, the top of the page is not      20 visible.</p> <p>21 Q. We're happy to show it to you      22 again. We showed it to you already.</p> <p>23 It says, "Adjusted -- age-adjusted      24 hazard ratio 95 percent confidence interval."</p> <p>25 Do you see that, Doctor?</p>	<p style="text-align: right;">Page 181</p> <p>1 but my question is very simple.</p> <p>2 The only statistically significant      3 hazard ratio in this column is for douching,      4 correct?</p> <p>5 MS. PARFITT: Objection. Form.</p> <p>6 And you aren't letting him finish the      7 answer.</p> <p>8 MS. DAVIDSON: Okay. I understand.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Dr. Siemiatycki, the only adjusted      11 hazard ratio that is statistically significant      12 is for douching, correct?</p> <p>13 MS. PARFITT: Objection. Form.</p> <p>14 THE WITNESS: If by "statistically      15 significant," you mean the confidence      16 interval -- the 95-percent confidence      17 interval does not include one, then that's      18 correct.</p> <p>19 BY MS. DAVIDSON:</p> <p>20 Q. For douching it shows a 1.37;      21 whereas, for talc vaginal, it shows 1.07      22 correct?</p> <p>23 MS. PARFITT: Objection. Form.</p> <p>24 He's already testified. He cannot --</p> <p>25 MS. DAVIDSON: Okay. I understand,</p>

<p style="text-align: right;">Page 182</p> <p>1 Michelle. You can have a standing 2 objection to this document.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. For douching shows 1.37 compared to 5 talc vaginal at 1.07, correct?</p> <p>6 MS. PARFITT: Objection. Form.</p> <p>7 THE WITNESS: That's what this 8 table -- these numbers in this table show.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Correct. And I'm asking you about 11 this table. That's all I'm asking you about.</p> <p>12 And for bath and --</p> <p>13 MS. PARFITT: Jessica, I don't want 14 to talk over you.</p> <p>15 MS. DAVIDSON: No. I'm not having 16 speeches about this. I'm asking questions 17 about this document.</p> <p>18 You can ask him all the questions 19 you want about -- about this paper.</p> <p>20 MS. PARFITT: He's --</p> <p>21 BY MS. DAVIDSON:</p> <p>22 Q. Dr. Siemiatycki, am I correct 23 that -- am I correct that the adjusted hazard 24 ratio for bath gel is 1.06 and for talc is 25 1.07; is that correct?</p>	<p style="text-align: right;">Page 184</p> <p>1 MS. PARFITT: Objection. Form. 2 THE WITNESS: Yes.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. Okay. Let's go back to the 5 Wentzensen, O'Brien paper 2021.</p> <p>6 MR. EPSTEIN: I can take over from 7 here. Thank you. I figured out the 8 zooming. I apologize.</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. Oh, Dr. Siemiatycki, you noted 11 earlier that O'Brien had a different risk ratio 12 for the Sister Study than was originally 13 reported in Gonzalez, right?</p> <p>14 A. Yes.</p> <p>15 Q. And one reason for that is that 16 O'Brien had more years of data, right?</p> <p>17 A. Yes.</p> <p>18 Q. And the 1.05 risk ratio for the 19 Sister -- for the Sister Study reported in 20 O'Brien was not statistically significant at 21 the 95-percent confidence interval, correct?</p> <p>22 A. Correct.</p> <p>23 Q. Okay. If we could look at 24 Wentzensen, O'Brien, going back to --</p> <p>25 MR. TISI: I'm trying to get it, so</p>
<p style="text-align: right;">Page 183</p> <p>1 MS. PARFITT: Dr. Siemiatycki, 2 would you answer the in the fashion you 3 have been attempting to answer it but have 4 been obstructed by counsel from giving 5 your answer.</p> <p>6 BY MS. DAVIDSON:</p> <p>7 Q. Dr. Siemiatycki, am I correct that 8 in this table the adjusted hazard ratio for 9 bath gel is not statistically significant at 10 1.06, and the adjusted hazard ratio for vaginal 11 talc is not statistically significant at 1.07, 12 correct?</p> <p>13 MS. PARFITT: Objection. Form.</p> <p>14 Answer as in fulsome a manner as 15 you need to answer the question 16 accurately.</p> <p>17 THE WITNESS: Yes.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Thank you. And the confidence 20 intervals for bath gel and for vaginal talc 21 use, the confidence intervals listed on this 22 table overlap significantly, right -- or 23 considerably, to use the language you used 24 before?</p> <p>25 They overlap considerably, right?</p>	<p style="text-align: right;">Page 185</p> <p>1 just give him a second.</p> <p>2 MS. DAVIDSON: Okay.</p> <p>3 MR. TISI: Thank you.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. I just have one question on this 6 paper.</p> <p>7 Dr. Siemiatycki, did the confidence 8 intervals in O'Brien 2021 for the risk ratio 9 for women with patent tubes versus women with 10 non patent tubes, did those confidence 11 intervals overlap considerably?</p> <p>12 MS. PARFITT: Objection. Form.</p> <p>13 THE WITNESS: Sorry. I don't know 14 which paper we're talking about or which 15 table we're talking about.</p> <p>16 BY MS. DAVIDSON:</p> <p>17 Q. In the Wentzensen and O'Brien paper 18 2021, that's what we've been talking about.</p> <p>19 I'm asking you: Did the confidence 20 intervals reported by those authors for women 21 with patent tubes and women who didn't have 22 patent tubes, did they overlap considerably?</p> <p>23 MS. PARFITT: Jessica, which table 24 are you referring to?</p> <p>25 He's trying to orient himself.</p>

<p>1           THE WITNESS: Are you waiting for 2           me to answer a question? 3 BY MS. DAVIDSON: 4           Q. Yes, of course. 5           MS. PARFITT: All right. We 6           thought -- 7 BY MS. DAVIDSON: 8           Q. There's a question pending. 9           Have you forgotten the question? 10          MS. PARFITT: He did. 11          Suzanne, could you read that. 12          MS. DAVIDSON: I'm sorry. I'm 13           talking to him, Michelle. 14 BY MS. DAVIDSON: 15          Q. Dr. Siemiatycki, have you forgotten 16           my question? 17          A. I thought that you were going to 18           point me to a table. I don't know which data 19           you are -- the question pertains to. I thought 20           you were going to indicate -- 21          Q. Doctor, you -- you included the 22           Wentzensen paper in your report, right? 23          A. Yes. 24          Q. Okay. I assume you read it, 25           correct?</p>	<p>Page 186</p> <p>1           immunological data from case control 2           studies and cohort studies suggests that 3           there may be a small positive association 4           between genital powder use and ovarian 5           cancer. The causal factors underlying the 6           association are not clear. Proposed 7           factors include talc, other minerals." 8           Do you want me to continue reading 9           their conclusion? 10          BY MS. DAVIDSON: 11          Q. I didn't ask you to read the 12           conclusions. 13           I asked you whether the confidence 14           intervals reported in this paper for patent 15           women overlap with the confidence interval 16           reported in this paper for non patent women. 17          A. I don't see -- 18          Q. It is a simple question. 19          A. I don't see the results that you're 20           alluding to. I don't see results for patent -- 21           I think we're talking about different papers. 22           MR. TISI: Which paper are you 23           talking about? 24           We have the Wentzensen 2021. 25          THE WITNESS: Wentzensen,</p>
<p>1           A. Correct. 2          Q. And you're aware that it provides 3           risk ratios for patent women and non patent 4           women, right? 5          A. Can you show me which table you're 6           referring to? 7          Q. I'm not referring to a table. I'm 8           asking you what the results are of the study. 9          A. I'm asking you which table you are 10           referring to. You're talking about relative 11           risks and overlapping confidence intervals. I 12           don't know what to look at. 13          Q. Do you know what the results were 14           of the Wentzensen study? 15          MS. PARFITT: Different question. 16          THE WITNESS: Okay. 17          MS. PARFITT: New question, Doctor. 18          THE WITNESS: Okay. Well, I'll 19           look at the final conclusion of their 20           paper, and we went through this paper 21           15 minutes ago. And -- let me go to the 22           abstract, which often has a concise 23           statement of the findings or the 24           conclusions. 25          So they say, "Taken together via</p>	<p>Page 187</p> <p>1           O'Brien -- 2 BY MS. DAVIDSON: 3          Q. Excuse me. I don't know who's 4           talking to you, but we don't have lawyers 5           talking to witnesses during a deposition. 6          MR. TISI: Well, no. I'm actually 7           talking to you. I'm trying to figure 8           out -- 9          MS. DAVIDSON: Hey, don't talk to 10           me because Michelle's defending this 11           deposition. 12          MR. TISI: Fine. Michelle, would 13           you ask -- 14 BY MS. DAVIDSON: 15          Q. Dr. Siemiatycki -- 16          MR. TISI: -- what she's referring 17           to? 18          MS. DAVIDSON: Okay. Hold on. 19          Guys -- 20          MR. TISI: I'm trying -- I'm trying 21           to help you. 22          MS. DAVIDSON: Cut. 23          MR. TISI: I'm trying to help you. 24          MS. DAVIDSON: You're not helping 25           me.</p>

<p>1 MR. TISI: Okay.</p> <p>2 MS. DAVIDSON: Thanks for your</p> <p>3 help. I don't want it.</p> <p>4 BY MS. DAVIDSON:</p> <p>5 Q. Dr. Siemiatycki, can you tell me,</p> <p>6 sitting here, what the -- what the risk ratio</p> <p>7 reported in this paper was for patent women</p> <p>8 versus non patent women and whether the</p> <p>9 confidence intervals overlapped?</p> <p>10 If you can't, just say you can't.</p> <p>11 MS. PARFITT: Jessica, I think</p> <p>12 there's a little confusion because they're</p> <p>13 not marked.</p> <p>14 MS. DAVIDSON: Excuse me. There's</p> <p>15 no confusion. I've asked the same</p> <p>16 question --</p> <p>17 MS. PARFITT: There actually is.</p> <p>18 MS. DAVIDSON: -- six times.</p> <p>19 MS. PARFITT: He's -- we're making</p> <p>20 sure you are talking about the Wentzensen,</p> <p>21 O'Brien because the one in his hand is</p> <p>22 Wentzensen, O'Brien, "Talc, body powder,</p> <p>23 and ovarian cancer: a summary of the</p> <p>24 epidemiologic evidence."</p> <p>25 Are we on the same article.</p>	<p>Page 190</p> <p>1 Q. You don't see it in here?</p> <p>2 Would you like to look at</p> <p>3 Wentzensen 2020 for that information?</p> <p>4 A. Well, I'll look at whatever you</p> <p>5 think I should look at, but I'm looking at the</p> <p>6 one you pointed me at five minutes ago; and I</p> <p>7 can't find that -- those results.</p> <p>8 So just point me to the results,</p> <p>9 and I'm happy to look at it.</p> <p>10 Q. If you look on page 8, the authors</p> <p>11 state --</p> <p>12 A. Which -- which paper? Which paper?</p> <p>13 Q. The same one we've been on.</p> <p>14 A. Okay, okay. Because you just</p> <p>15 switched papers. But now you're back to the</p> <p>16 one we've been talking about. That's fine.</p> <p>17 Q. No, I didn't switch papers, Doctor.</p> <p>18 It says, "A history of genital</p> <p>19 powder use was associated with an increase of</p> <p>20 developing incident ovarian cancer. Hazard</p> <p>21 ratio 1.13. Confidence interval 1.01 to 1.26.</p> <p>22 This association was null among women who did</p> <p>23 not have patent tubes, 0.99 confidence interval</p> <p>24 .86 to 1.15."</p> <p>25 Do those confidence intervals</p>
<p>1 MS. DAVIDSON: We are on the same</p> <p>2 article, Michelle.</p> <p>3 MS. PARFITT: Okay. That's good.</p> <p>4 Okay. That's all. That's good.</p> <p>5 Here you go.</p> <p>6 THE WITNESS: And are you claiming</p> <p>7 that there are results here showing the</p> <p>8 association for women with patent</p> <p>9 reproductive tracts and non patent; is</p> <p>10 that what you're saying?</p> <p>11 BY MS. DAVIDSON:</p> <p>12 Q. Well, you testified earlier that</p> <p>13 you wrote in your paper that these authors</p> <p>14 reported particularly high risk for patent</p> <p>15 women.</p> <p>16 So do you not recall whether</p> <p>17 there -- this study actually has results for</p> <p>18 patent and non patent women?</p> <p>19 A. Well, as -- as this is a review</p> <p>20 article, it doesn't necessarily show numerical</p> <p>21 results for each study that they took into</p> <p>22 account. And I'm just looking to see whether</p> <p>23 they have any numeric -- because you're asking</p> <p>24 about numerical results, overlaps of confidence</p> <p>25 intervals and things. And I at first glance --</p>	<p>Page 191</p> <p>1 overlap?</p> <p>2 A. I'm now looking for that sentence.</p> <p>3 So page 8, the first column, I assume; and</p> <p>4 you're talking about the first full paragraph</p> <p>5 on that -- in that column; is that where you're</p> <p>6 looking, or the second?</p> <p>7 Q. Can we make this easier?</p> <p>8 Do the -- does the confidence</p> <p>9 interval of 1.01 to 1.26 overlap with a</p> <p>10 confidence interval of .86 to 1.15?</p> <p>11 A. Okay. Repeat that question.</p> <p>12 Q. Does the confidence interval of</p> <p>13 1.01 to 1.26 overlap with the confidence</p> <p>14 interval of .86 to 1.15?</p> <p>15 A. Yes.</p> <p>16 Q. Okay.</p> <p>17 MS. DAVIDSON: Now, let's go to</p> <p>18 O'Brien 2020, and let's mark that as</p> <p>19 Exhibit --</p> <p>20 MR. EPSTEIN: 14.</p> <p>21 MS. DAVIDSON: -- 14.</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>

<p style="text-align: right;">Page 194</p> <p>1 (Whereupon, Defendant's 2 Exhibit D14, Paper entitled, "Association 3 of Powder Use in the Genital Area With 4 Risk of Ovarian Cancer," by Katie M. 5 O'Brien, PhD, et al., was marked for 6 identification.)</p> <p>7 MS. DAVIDSON: Do you guys have 8 that paper in front of you?</p> <p>9 THE WITNESS: We're getting it.</p> <p>10 MS. PARFITT: And, Jessica, for 11 accuracy, you're talking about the O'Brien 12 paper entitled, "Association of Powder Use 13 in the Genital Area with Risk" --</p> <p>14 MS. DAVIDSON: I'm going to -- 15 yeah. I'm going to -- I'm going to mark 16 it as soon as Noah puts it up.</p> <p>17 Okay. So, Noah, what number are we 18 on?</p> <p>19 MR. EPSTEIN: This is Exhibit 14.</p> <p>20 MS. DAVIDSON: Okay. You have it 21 right up there. This is great.</p> <p>22 Chris, you have to credit me with 23 this PDF naming idea.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. Exhibit 14 is, "Association of</p>	<p style="text-align: right;">Page 196</p> <p>1 A. Correct. 2 MS. PARFITT: He does. 3 MS. DAVIDSON: We can go to the 4 conclusion.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Dr. Siemiatycki, are you looking 7 for -- for this in a hard copy?</p> <p>8 A. Yeah. I have the hard copy of this 9 page that's on the screen.</p> <p>10 So I don't see any -- I don't see 11 any tables. This is not a --</p> <p>12 Q. Okay. Doctor, you're -- I assume 13 that you know how to read an epidemiological 14 paper, correct?</p> <p>15 MS. PARFITT: Objection. Form.</p> <p>16 THE WITNESS: I'm not sure how to 17 answer that, but yes.</p> <p>18 BY MS. DAVIDSON:</p> <p>19 Q. Okay. Can you tell me where in 20 this paper it reports confidence intervals for 21 patent and non patent women and whether those 22 confidence intervals overlap?</p> <p>23 A. I didn't hear that whole sentence. 24 Can I tell you where they are?</p> <p>25 Q. Uh-huh. You can't find the</p>
<p style="text-align: right;">Page 195</p> <p>1 Powder Use in the Genital Area With Risk of 2 Ovarian Cancer," published in JAMA by O'Brien. 3 You're familiar with this paper, 4 right, Doctor?</p> <p>5 A. Yes.</p> <p>6 Q. And you've testified about this 7 before, and I just have one question for you on 8 this paper.</p> <p>9 On this paper do the confidence 10 intervals for patent women and non patent women 11 reported by this paper overlap?</p> <p>12 A. I'm sorry. Do they what?</p> <p>13 Q. Overlap. Do the confidence 14 intervals overlap?</p> <p>15 The same question I've been asking.</p> <p>16 A. You want to -- you want to point me 17 specifically to the results in the table, or 18 should I try to find them myself?</p> <p>19 Do you know in which table those 20 results are found?</p> <p>21 MS. PARFITT: We're scrolling to 22 them right now.</p> <p>23 BY MS. DAVIDSON:</p> <p>24 Q. We're scrolling through -- you do 25 have the paper in front of you, correct?</p>	<p style="text-align: right;">Page 197</p> <p>1 confidence intervals and the reported -- 2 MS. PARFITT: We're having a hard 3 time hearing you between the remote nature 4 and his hearing issue, he is having a hard 5 time hearing you.</p> <p>6 I'm sorry. If you want to read it 7 back to him.</p> <p>8 MS. DAVIDSON: I don't know. He's 9 heard me all day.</p> <p>10 MS. PARFITT: No, no. Actually, he 11 hasn't. That's why I keep interrupting. 12 He hasn't, and my apologies for that; but 13 we are having an issue here.</p> <p>14 THE WITNESS: So you want me to 15 read through this page and find the 16 results that you are referring to?</p> <p>17 It will take me a minute to read 18 through the page, or do you want to say 19 specifically --</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. I am asking you: What are the 22 point estimates in confidence intervals 23 reported in this paper perineal talc use and 24 the development of ovarian cancer for patent 25 women versus non patent women?</p>

<p style="text-align: right;">Page 198</p> <p>1 A. And it's on this page?</p> <p>2 Q. It's in this paper.</p> <p>3 A. It's in the paper. So it will take</p> <p>4 me about 10 or 15 minutes to read --</p> <p>5 Q. It's going to take you 10 or</p> <p>6 15 minutes to identify the risk ratios in this</p> <p>7 paper?</p> <p>8 A. To read -- because I would have</p> <p>9 to -- unless you point me to a specific paper</p> <p>10 or a page or a specific table and call them, I</p> <p>11 will read from the beginning the entire paper</p> <p>12 to try to find what is the nature of the</p> <p>13 question.</p> <p>14 I still don't understand the</p> <p>15 question. You're asking me to find some</p> <p>16 results in a paper, in an eight-page paper.</p> <p>17 Q. I just want to make sure I</p> <p>18 understand.</p> <p>19 It would take you 10 or 15 minutes</p> <p>20 to find the -- to find the risk -- the point</p> <p>21 estimates reported by these authors?</p> <p>22 A. Yes, or the ones that you are</p> <p>23 referring to.</p> <p>24 Q. Do you recall whether this paper --</p> <p>25 A. I'm sorry?</p>	<p style="text-align: right;">Page 200</p> <p>1 know --</p> <p>2 Q. I'm not asking you to read my mind.</p> <p>3 I'm asking you to read the paper.</p> <p>4 A. Is the data that you're referring</p> <p>5 to in Table 2?</p> <p>6 Q. Doctor, I'm asking you to tell me</p> <p>7 what this paper reports in terms of hazard</p> <p>8 ratio for patent versus non patent women. I</p> <p>9 don't care where in the paper you find it.</p> <p>10 I'm just asking you: What does it</p> <p>11 report, and do the confidence intervals</p> <p>12 overlap?</p> <p>13 A. Okay.</p> <p>14 Q. Is that too hard?</p> <p>15 MS. PARFITT: Objection. Form.</p> <p>16 THE WITNESS: It's hard if I've got</p> <p>17 to guess where the information is; but if</p> <p>18 you have time, I'll read through the paper</p> <p>19 and try to find that information.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. You would have to read this entire</p> <p>22 paper in order to answer that question?</p> <p>23 MS. PARFITT: Objection. Form.</p> <p>24 THE WITNESS: To know which results</p> <p>25 you're talking about, yes. I would have</p>
<p style="text-align: right;">Page 199</p> <p>1 Q. Do you recall whether this paper</p> <p>2 provided risk estimates for patent women versus</p> <p>3 non patent women?</p> <p>4 Do you recall that sitting here</p> <p>5 today?</p> <p>6 A. Well, I believe -- I believe it</p> <p>7 did. I believe it did. I'm just looking</p> <p>8 because this group published several papers in</p> <p>9 a few years, and I'm not sure which results</p> <p>10 were presented in which papers. So I'm just</p> <p>11 going to look to see if I can find something in</p> <p>12 this.</p> <p>13 So I see in Figure -- in the figure</p> <p>14 on page 54 some results separately by patent</p> <p>15 and non patent women.</p> <p>16 Q. Uh-huh. Are you looking at</p> <p>17 Table 2?</p> <p>18 A. No. I'm looking at the figure.</p> <p>19 But if you --</p> <p>20 Q. Okay.</p> <p>21 A. -- want me to look at Table 2 --</p> <p>22 Q. I don't care where you look,</p> <p>23 Doctor. I just want the answer to my question.</p> <p>24 I don't care where you look.</p> <p>25 A. So I'm not a mind reader. I don't</p>	<p style="text-align: right;">Page 201</p> <p>1 to at least skim through the entire paper</p> <p>2 to know what you're talking about.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. Doctor, when you read an</p> <p>5 epidemiological paper, is that -- you're not --</p> <p>6 you're not familiar with how to identify risk</p> <p>7 ratios from tables?</p> <p>8 MS. PARFITT: Objection. Form.</p> <p>9 Misstates his testimony.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. I'm just trying to understand why</p> <p>12 it would take you 15 minutes to tell me what</p> <p>13 the hazard ratios are reported in this paper --</p> <p>14 A. Because --</p> <p>15 Q. -- which you covered in your</p> <p>16 report.</p> <p>17 A. Because a paper of three or four</p> <p>18 thousand words with several paragraphs and</p> <p>19 sections and sentences may have that</p> <p>20 information that you are interested in buried</p> <p>21 anywhere in the paper. So to find it, I need</p> <p>22 to go through it.</p> <p>23 Q. All right. Well --</p> <p>24 A. I don't understand why you can't</p> <p>25 tell me on which page or table the numbers are</p>

<p>Page 202</p> <p>1 that you are asking me to comment on.</p> <p>2 Q. I can point you to it if you really</p> <p>3 cannot find it on your own.</p> <p>4 MR. GOLOMB: Suzanne, how much time</p> <p>5 is left? How much time is left?</p> <p>6 THE COURT REPORTER: Okay. One</p> <p>7 second.</p> <p>8 MS. DAVIDSON: Suzanne, let's go</p> <p>9 off the record.</p> <p>10 THE COURT REPORTER: We're off the</p> <p>11 record.</p> <p>12 (Discussion held off the record.)</p> <p>13 MS. DAVIDSON: Let's go back on the</p> <p>14 record and let's turn to page 54 of</p> <p>15 O'Brien.</p> <p>16 THE WITNESS: 54?</p> <p>17 MS. DAVIDSON: Uh-huh.</p> <p>18 THE WITNESS: Okay.</p> <p>19 MS. PARFITT: There was a question</p> <p>20 pending, Jessica, when he went off camera</p> <p>21 is that -- when you went off camera.</p> <p>22 Is that question still pending are,</p> <p>23 or are we starting over?</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. Dr. Siemiatycki, do you remember</p>	<p>Page 204</p> <p>1 I read to you five minutes ago from the other</p> <p>2 paper, aren't they?</p> <p>3 A. I don't remember.</p> <p>4 MS. PARFITT: Objection. Form.</p> <p>5 BY MS. DAVIDSON:</p> <p>6 Q. Okay. And these two confidence</p> <p>7 intervals overlap considerably, correct?</p> <p>8 A. Correct.</p> <p>9 Q. Okay. Let's move on.</p> <p>10 Dr. Siemiatycki, I wanted to mark</p> <p>11 as our final exhibit a paper entitled,</p> <p>12 "Quantitative recall bias analysis of the talc</p> <p>13 and ovarian cancer association." First author</p> <p>14 is Goodman.</p> <p>15 (Whereupon, Defendant's Exhibit</p> <p>16 D15, Paper entitled, "Quantitative recall</p> <p>17 bias analysis of the talc and ovarian</p> <p>18 cancer association," by Julie E.</p> <p>19 Goodman, et al., was marked for</p> <p>20 identification.)</p> <p>21 MS. DAVIDSON: Noah, would you be</p> <p>22 so kind as to put that in the chat and on</p> <p>23 the screen.</p> <p>24 MR. EPSTEIN: On it.</p> <p>25 MS. PARFITT: Give us one moment</p>
<p>Page 203</p> <p>1 the question?</p> <p>2 A. I think you asked -- were asking if</p> <p>3 I could describe and comment on the risk</p> <p>4 estimates, the relative risk estimates for</p> <p>5 women with patent reproductive tracts and women</p> <p>6 without, not patent.</p> <p>7 Q. Correct. And the answer is on</p> <p>8 page 54, right?</p> <p>9 A. Well, that's one of the places</p> <p>10 where the answer -- an answer can be found to</p> <p>11 that question.</p> <p>12 Q. And as I read to you from the last</p> <p>13 Wentzensen paper, it's actually the same. The</p> <p>14 same numbers are reported here, right?</p> <p>15 1.13 hazard ratio for patent woman</p> <p>16 with a 1.01 to 1.26 confidence interval; and</p> <p>17 for non patent women .99 with a .86 to a 1.15</p> <p>18 confidence interval, correct?</p> <p>19 MS. PARFITT: Objection. Form.</p> <p>20 THE WITNESS: So I -- I don't</p> <p>21 recall the question you asked before about</p> <p>22 this; but yeah, those are the two numbers</p> <p>23 that are in this table.</p> <p>24 BY MS. DAVIDSON:</p> <p>25 Q. And those are the same numbers that</p>	<p>Page 205</p> <p>1 please.</p> <p>2 MS. DAVIDSON: Sure.</p> <p>3 MS. PARFITT: It's a different</p> <p>4 article than the one talked about earlier,</p> <p>5 and we'll have to look at the screen. He</p> <p>6 doesn't have a copy of it.</p> <p>7 THE WITNESS: This -- this is</p> <p>8 very --</p> <p>9 BY MS. DAVIDSON:</p> <p>10 Q. We're marking this paper as</p> <p>11 Exhibit 15, I believe.</p> <p>12 Have you seen this paper before,</p> <p>13 Dr. Siemiatycki?</p> <p>14 A. I don't think I have. It looks</p> <p>15 like it's a very new -- newly published one.</p> <p>16 Q. Dr. Siemiatycki, have you ever</p> <p>17 done -- I'm sorry. I didn't turn my camera on.</p> <p>18 That's not on purpose.</p> <p>19 Have you ever done any analysis of</p> <p>20 how much recall bias would be necessary to</p> <p>21 attenuate the results of the talc ovarian</p> <p>22 cancer studies to the null?</p> <p>23 A. No.</p> <p>24 Q. Have you ever seen any papers</p> <p>25 analyzing that question?</p>

<p>1       A. To attenuate to the null?</p> <p>2            Have I seen any papers?</p> <p>3            I -- I don't recall any -- seeing</p> <p>4 it, but it may be that I did; but I don't</p> <p>5 recall.</p> <p>6       Q. Okay.</p> <p>7            MS. DAVIDSON: I believe I'm done,</p> <p>8 but let's just go off the record for three</p> <p>9 minutes for me to check my notes; and then</p> <p>10 I'll turn you over to Michelle.</p> <p>11          MS. PARFITT: Thank you, Jessica.</p> <p>12          MS. DAVIDSON: Okay.</p> <p>13          (Whereupon, a break was taken.)</p> <p>14 BY MS. DAVIDSON:</p> <p>15       Q. Dr. Siemiatycki, are you aware that</p> <p>16 your testimony today is on behalf of six</p> <p>17 specific Bellwether plaintiffs who've been</p> <p>18 chosen for trial in the MDL proceeding?</p> <p>19       A. No, I am not aware.</p> <p>20       Q. Have you ever heard the names</p> <p>21 Ms. Converse, Ms. Newsome, or Ms. Rausa?</p> <p>22       A. No, I haven't.</p> <p>23       Q. Have you ever heard the names</p> <p>24 Ms. Carl or Ms. Balderrama?</p> <p>25       A. No, I haven't.</p>	Page 206	<p>1            So I do want to apologize and thank you</p> <p>2 for your time today.</p> <p>3            MS. PARFITT: Oh, thank you,</p> <p>4 Jessica. I appreciate that. We</p> <p>5 understand you're not feeling well.</p> <p>6            THE WITNESS: Thank you.</p> <p>7            MS. PARFITT: Okay. I'm ready to</p> <p>8 go, so why don't we --</p> <p>9            MS. DAVIDSON: Go ahead.</p> <p>10          MS. PARFITT: All right.</p> <p>11          MS. DAVIDSON: Michelle, can I ask</p> <p>12 a favor?</p> <p>13          MS. PARFITT: Of course.</p> <p>14          MS. DAVIDSON: Could we switch</p> <p>15 the -- could we switch the microphone to</p> <p>16 you because you are really hard to hear.</p> <p>17          (Discussion held off the record.)</p> <p>18          EXAMINATION</p> <p>19 BY MS. PARFITT:</p> <p>20       Q. Dr. Siemiatycki, you'll recall that</p> <p>21 several hours ago counsel for J&amp;J asked you</p> <p>22 some questions with regard to an EPA document</p> <p>23 that recently came out banning chrysotile</p> <p>24 asbestos.</p> <p>25          Do you recall that series of</p>	Page 208
<p>1       Q. Have you looked at any records --</p> <p>2 any medical records or other documents related</p> <p>3 to the plaintiffs in this -- in these cases?</p> <p>4       A. No, I haven't.</p> <p>5       Q. Do you know anything about the</p> <p>6 plaintiff's in these cases usage of talcum</p> <p>7 powder?</p> <p>8       A. No, I don't.</p> <p>9       Q. Do you know what other risk factors</p> <p>10 any of these plaintiffs had for ovarian cancer?</p> <p>11       A. No, I don't.</p> <p>12       Q. Are you offering an opinion that</p> <p>13 talcum powder use caused any specific women to</p> <p>14 develop ovarian cancer?</p> <p>15          MS. PARFITT: Objection. Form.</p> <p>16          THE WITNESS: No. That's not what</p> <p>17 I'm --</p> <p>18          MS. DAVIDSON: Okay. Subject to</p> <p>19 any questions Michelle has, I have no more</p> <p>20 questions at this time.</p> <p>21          I do just want to before I turn</p> <p>22 this over to Michelle, as I said earlier,</p> <p>23 I'm not feeling well; and I did get very</p> <p>24 frustrated this morning. I did not think</p> <p>25 my outburst was particularly professional.</p>	Page 207	<p>1            questions?</p> <p>2       A. Yes, I do.</p> <p>3       Q. Okay. Let me show you what's been</p> <p>4 entitled, "Environmental Protection Agency."</p> <p>5 It's 40 CFR, Part 751.</p> <p>6          And specifically, I'd like you to</p> <p>7 turn to page 14 of that document. Here you go,</p> <p>8 Doctor.</p> <p>9       A. Thank you.</p> <p>10       Q. And if you'll turn to page 14.</p> <p>11          MS. DAVIDSON: Can we put that up</p> <p>12 on the screen as well?</p> <p>13       MS. PARFITT: Okay.</p> <p>14       MS. DAVIDSON: And should we mark</p> <p>15 it as an exhibit?</p> <p>16       MS. PARFITT: Sure. We certainly</p> <p>17 can. We'll mark it as plaintiff's Exhibit</p> <p>18 Number 1.</p> <p>19          (Whereupon, Plaintiff's Exhibit P1,</p> <p>20 Pre-Publication Notice, was marked for</p> <p>21 identification.)</p> <p>22       MS. PARFITT: And, Patrick, if you</p> <p>23 have a copy of the -- perfect. Thank you,</p> <p>24 Patrick. And that will be marked as</p> <p>25 plaintiff's Exhibit Number 1.</p>	Page 209

<p>1        And page 14, Patrick. Can you  2        share with us page 14?  3        Thank you so much.</p> <p>4 BY MS. PARFITT:</p> <p>5        Q. Okay. And, Dr. Siemiatycki, at the  6        bottom of page 14, specifically, the document  7        says, "Additionally, some talc deposits and  8        articles containing talc have been shown to  9        contain asbestos. Thus, EPA recognizes that  10       certain uses of talc may present the potential  11       for asbestos exposure."</p> <p>12       Did I read that correctly?</p> <p>13       A. Yes.</p> <p>14       Q. All right. What is the  15       significance of that statement concerning the  16       fact that talc deposits and articles containing  17       talc have been shown to contain asbestos?</p> <p>18       What significance does that  19       statement have to your opinions with regard to  20       the relationship of asbestos to the biological  21       plausibility that talc can cause ovarian  22       cancer?</p> <p>23       A. Well, my main take away from this  24       is that if the epidemiological evidence  25       demonstrates an association between women's use</p>	Page 210	<p>1        statistical analyses; and the credibility of  2        that meta-analysis is persuasive to me.</p> <p>3        I've also seen a recent report -- I  4        can't remember now -- from a Korean group that  5        updated the Camargo analysis because the  6        Camargo analysis only included papers published  7        until about 2010 or 2011; and the new paper,  8        relatively new paper publishes additional  9        papers. And it goes in exactly the same  10       direction. It reinforces the same conclusion.</p> <p>11       Q. Did you also review the IARC  12       monograph 2012?</p> <p>13       A. Well, I didn't need to review it  14       because I was on the panel.</p> <p>15       Q. Does the IARC monograph 2012, does  16       it address talcum powder as a cause of  17       ovarian -- or talc as a cause of ovarian  18       cancer?</p> <p>19       A. There is a mention of talc because,  20       although this particular IARC monograph meeting  21       did not include talc as one of the primary  22       exposures to be reevaluated, it did include  23       asbestos.</p> <p>24       And as part of the asbestos  25       evaluation, there was an evaluation of talc</p>	Page 212
<p>1        of talc and ovarian cancer, this information  2        provides some potential avenues for biological  3        plausibility that the asbestos might be  4        responsible for excess risks for  5        epidemiologically demonstrated excess risks of  6        ovarian cancer.</p> <p>7        Q. Dr. Siemiatycki, some time ago you  8        were also asked whether or not you had done a  9        systematic review of the literature regarding  10       asbestos and ovarian cancer.</p> <p>11       Do you remember those questions?</p> <p>12       A. Yes.</p> <p>13       Q. All right. Does the fact that you  14        did not do a complete systematic review of  15        asbestos prevent you from opining on a  16        relationship of asbestos to be biological  17        plausibility of talcum powder causing ovarian  18        cancer?</p> <p>19       A. Not at all.</p> <p>20       Q. Why not?</p> <p>21       A. Well, there have been now a couple  22        of reviews of the topic. One, the main one by  23        Camargo and colleagues, was carried out by very  24        a competent team. They describe their methods  25        of searching for data of carrying out the</p>	Page 211	<p>1        containing asbestos form fibers. And so there  2        was an evaluation, which concluded that talc  3        containing asbestos form fibers was carcinogenic.</p> <p>4        Q. You were asked questions about  5        reaching out to SGO, ACOG, the NCI PDQ, and  6        other medical and scientific organizations.</p> <p>7        Do you remember that series of  8        questions?</p> <p>9        A. Yes, I do.</p> <p>10       Q. Why haven't you, as an  11        epidemiologist, reached out to speak to SGO and  12        ACOG and -- excuse me, the PDQ?</p> <p>13       A. Well, that's not the way scientific  14        communication works. I never in my career  15        reached out to organizations like that to give  16        them my opinions or to tell them about my  17        results because they don't really have the  18        capacity to intake opinions and information  19        from every researcher who studies all of the  20        topics in their purview. So it's just not  21        done. I've never heard of researchers doing  22        things like that.</p> <p>23       The normal and natural and  24        efficient way is to communicate through  25        scientific publications and scientific</p>	Page 213

<p>1 meetings. And information, once it -- which it 2 gets into such forums, then gets assimilated 3 into the general medical research community and 4 it ends up influencing those organizations if 5 they have responsibility for communicating 6 information like this to the public. 7       But in my experience -- and I've 8 been president of Association of 9 Epidemiologists. I was on the board of the 10 American College of Epidemiology. And these 11 organizations are not equipped to -- to carry 12 out evaluations of all possible research topics 13 and to communicate all of the possible research 14 issues to the public. 15       Q. Do scientists like yourself in the 16 epidemiologic community rely on groups like the 17 NCI PDQ and other -- SGO, ACOG, and others for 18 scientific literature as part of their bases 19 for their opinions? 20       A. No. I've -- I have never seen any 21 of those organizations or NCI PDQ cited as a 22 reference in a scientific journal. I've never 23 heard scientists communicate that some 24 important result is reported in such media as 25 NCI PDQ or some of the websites of</p>	<p>Page 214</p> <p>1 specifically at column of questions Numbers 1 2 through 4 and 7 -- and I'll show it to you, and 3 specifically, I'm referencing Number 5 and 6. 4       And in that you stated, "From 2016 5 to 2020 January, I provided, A) consultation 6 services to law firms that were involved in 7 litigation against companies that produced or 8 sold talcum powder products." 9       Do you remember that series of 10 questions? 11       A. Yes, I do. 12       Q. Okay. And you represented to 13 counsel that you were incorrect with regard to 14 that -- those dates. All right. 15       How did you prepare this document, 16 and what documents did you rely on for purposes 17 of that statement? 18       A. I didn't rely on any documents. I 19 did it by memory, and I did it hastily because 20 I didn't think it was important document any of 21 this. 22       I understand how the IARC system 23 works, having been part of it for a period of 24 time. And I -- I sort of wrote things down 25 hastily without carrying out any verifications</p>
<p>Page 215</p> <p>1 organizations like this. It's just not part of 2 the infrastructure of knowledge transmission 3 within the scientific community. 4       Q. I can't recall the precise 5 question, Dr. Siemiatycki, but you were asked 6 specifically whether or not you agreed or 7 disagreed with the American Cancer Society. 8       If, in fact, it was the 9 representation the American Cancer Society that 10 talcum powder was not associated with ovarian 11 cancer and/or there was insufficient evidence 12 to support that talcum powder could cause 13 ovarian cancer or associated with ovarian 14 cancer, would you agree or disagree with that? 15       A. I would disagree with that. 16       Q. Doctor, you were asked several 17 questions with regard to a declaration of 18 interest that you filed with IARC as well as a 19 letter that you sent to IARC anticipating their 20 re-review of the talcum powder in 2024. 21       Do you remember those questions? 22       A. Yes, I do. 23       Q. And do you remember counsel 24 addressing I believe it's Exhibit 3, 2 or 3, 25 the actual Declaration of Interest,</p>	<p>Page 217</p> <p>1 of the dates. I didn't think the dates were 2 important. I put them in here. I'm not sure 3 why, but at that -- when I did this in the 4 summer of 2023, I was recollecting when these 5 things happened; and I got it wrong. 6       Q. Do you have an understanding that 7 this litigation was in bankruptcy for a period 8 of time? 9       A. I -- I heard about that. 10       Q. Okay. What was the nature of your 11 work in this case during the period of 12 bankruptcy, if any? 13       A. I didn't do any during that period. 14       Q. Is it fair to say that there was a 15 period of a few years where you did no work at 16 all because the case was being stayed in 17 bankruptcy? 18       A. Yes, that's true. 19       Q. You were asked about the Goodman 20 article, and specifically the Goodman article 21 that's entitled, "A critical review of talc and 22 ovarian cancer." 23       Do you remember that question? Do 24 you remember that question? 25       A. Yes, I do.</p>

Page 218 1 Q. Okay. And specifically, you 2 addressed the Goodman article in your report? 3 A. Yes, I do. 4 Q. All right. Would you turn to your 5 report. I believe it's page 76. 6 Tell me when you're ready. 7 A. Yes. 8 Q. What, if any, methodological flaws 9 did you observe based upon your review and 10 analysis of the Goodman study entitled, "A 11 critical review of talc and ovarian cancer"? 12 A. Well, I found it methodologically 13 quite flawed, and I didn't take the resulting 14 opinions that they gave very seriously. I 15 could list some of the problems that -- that I 16 pointed out. 17 Q. What were they? 18 A. First, it's curious that they did 19 not conduct a meta-analysis to estimate the 20 relative risk from the unsong of epidemiologic 21 studies that they considered of good quality. 22 That would be a natural thing to do if they 23 had -- they had all the material they needed. 24 Instead, they rely on a fatally 25 flawed method of using statistical significance	Page 220 1 done that, and you produce a meta-analysis; and 2 they -- you don't produce a meta-analysis. You 3 produce a count of how many studies are 4 individually significant or nonsignificance, 5 and you find that most are them or all of them 6 are not significant. 7 Well, that is a hopeless distortion 8 of what statistical significance is about. But 9 this is what they did in this -- in this paper. 10 Q. In this Goodman paper? 11 A. In this Goodman paper. 12 Q. Any other? 13 A. They make basic error of asserting 14 that cohort studies across the board are 15 superior in validity to case control studies. 16 This is completely false. There is 17 no credible epidemiological literature that 18 demonstrates or proves such a proposition. 19 Each study has strengths and weaknesses, and it 20 requires sophistication to tally up the 21 strengths and weaknesses of each study and to 22 find what the results mean. Whether it's a 23 case control or a cohort study is not a 24 determinant of the quality of and the validity 25 of the results.
Page 219 1 of individual studies and tallying up how many 2 studies are individually statistically 3 significant to guide their overall conclusion. 4 Q. And what did you mean by that? 5 A. Well, in the old days, people used 6 to do that. People used to count up -- do a 7 literature review and count how many studies 8 show a statistically significant association 9 with something and how many don't and use that 10 as a kind of an indicator of whether there's an 11 overall trend that shows an association. 12 And it was painfully clear to 13 sophisticated statisticians and other 14 researchers, clinical as well as 15 epidemiological, that it's hopelessly flawed to 16 count statistical significance studies as a 17 measure of anything. Statistical significance 18 does not -- is not something that can be 19 counted up between -- among studies. 20 The best way to guarantee that 21 you'll never find an association is to conduct 22 studies with small numbers -- small enough 23 numbers of subjects that none of the results 24 will be statistically significant. And then 25 you gather together all the studies that have	Page 221 1 The third problem with the Goodman 2 study -- well, they -- they present a bunch of 3 studies in their list, but some of them are 4 actually subsumed in other -- some of the 5 papers are subsumed in other studies, which 6 were follow-ups and analyses done later. And 7 this is not how to -- how to do a review of a 8 topic. It's sort of a double-counting problem. 9 And the next problem was their 10 interpretation of the conformity of the results 11 with Bradford Hill's considerations. It's 12 their interpretation and their evaluation, 13 their description of how the Bradford Hill 14 considerations apply to the literature. The 15 studies that they have considered is very 16 subjective, and it's unreliable. It's not 17 objective and fact-based. 18 Well, and the next point -- my last 19 point was while the they point out many gaps in 20 knowledge regarding the transport of fibers and 21 the mechanisms of carcinogenesis, they tend to 22 interpret the absence of evidence as evidence 23 against an association. So -- 24 Q. And what does that mean? 25 A. Well, when -- you know, there are

<p>Page 222</p> <p>1 some areas where there just hasn't been    2 definitive research to demonstrate that certain    3 mechanisms of translocation of -- transport of    4 fibers in the body would support the hypothesis    5 of talc fibers causing ovarian cancer.</p> <p>6 It's -- it's fine to present data    7 and make an argument that there are gaps in    8 knowledge. But their conclusion from the gaps    9 of knowledge is that this is evidence against    10 the hypothesis that the particles can be    11 transported to the ovaries, and that's a    12 logical flaw.</p> <p>13 Q. Any others that you wish to    14 express?</p> <p>15 A. No others that I would express now.</p> <p>16 Q. Okay. Jumping around, let me    17 direct your attention to the -- you can hold on    18 to the report -- direct your attention to the    19 Wentzensen and O'Brien article entitled, "Talc    20 body powder and ovarian cancer: A summary of    21 an epidemiological test."</p> <p>22 Do you have that?</p> <p>23 A. I have that.</p> <p>24 Q. Okay. Specifically, if you would    25 turn to the conclusions section, which is</p>	<p>Page 224</p> <p>1 performed and documented in now several    2 reports?</p> <p>3 A. I think the associations is of    4 moderate magnitude compared to other cancer    5 risk factors if you look -- or disease risk    6 factors. And there are well-established cancer    7 risk factors that have relative risks well in    8 the range of 1.3, which is what we're talking    9 about for talc and ovarian cancer or even much    10 lower. Even for ovarian cancer there are    11 well-established risk factors that have -- that    12 have relative risks in the order of 1.3.</p> <p>13 So that is certainly not -- you    14 know, these terms "weak, strong, moderate" are    15 not scientifically designed. There's no    16 convention about what constitutes strong    17 evidence or weak evidence.</p> <p>18 The -- the original development of    19 risk factor -- modern risk factor epidemiology    20 occurred in the 1950s around the issue of    21 tobacco and lung cancer, and it so happened    22 that the relative risk of that association was    23 about 10 or 15. And that became kind of a    24 marker for relative risks between risk factors    25 and disease.</p>
<p>Page 223</p> <p>1 Section 6. And it spans to the front of    2 page 9 -- the top of page 9.</p> <p>3 Are you there?</p> <p>4 A. Yes, I am.</p> <p>5 Q. The sentence starts, "Independent    6 of the underlying cause" --</p> <p>7 A. I have it.</p> <p>8 Q. "Independent of the underlying    9 cause, the association between powder use and    10 ovarian cancer is weak. The low relative risk    11 translates to a very low risk increase given    12 the rarity of ovarian cancer."</p> <p>13 Do you remember that question being    14 asked of you?</p> <p>15 A. Yes, I do.</p> <p>16 Q. Okay. And do you agree or disagree    17 with that statement?</p> <p>18 A. With the statement that the    19 evidence is weak?</p> <p>20 Q. Correct.</p> <p>21 A. No, I don't agree with that.</p> <p>22 Q. Okay. How would you describe the    23 evidence in the talcum powder and ovarian    24 cancer based upon the literature review --    25 systematic literature review that you have</p>	<p>Page 225</p> <p>1 We -- people didn't know at the    2 time that hardly any chance of risk factor    3 would ever be shown to have such strong and    4 high relative risk. So having that as the    5 first thing that the discipline discovered and    6 latched on to and started developing    7 terminology around and conventions around in a    8 way distorted how subsequent epidemiology of    9 other risk factors was described in the    10 literature and described even in public.</p> <p>11 But certainly there is -- there are    12 many examples now of risk factors which are in    13 the same range as the talc ovarian cancer    14 relative risk, which are considered strongly    15 supported evidence in epidemiology.</p> <p>16 Q. You have stated in your report that    17 the evidence in the talcum powder and ovarian    18 cancer case, based upon your systematic review,    19 is significant.</p> <p>20 When said "the evidence regarding    21 consistency and strength is significant," what    22 do you mean by that?</p> <p>23 A. I'm not sure. If you could point    24 me to a page.</p> <p>25 That the evidence is significant?</p>

<p style="text-align: right;">Page 226</p> <p>1 Q. Generally, the strength of the 2 evidence and the association of the evidence is 3 significant.</p> <p>4 A. Well, I don't remember using that 5 word in that context. But, you know, I'd say 6 the evidence is persuasive and persuasive 7 because of some of the concepts that we 8 associate with the Bradford Hill 9 considerations; but it's not because it's 10 Bradford Hill, but the strength, the magnitude 11 and the -- especially the consistency of the 12 results from different studies carried out in 13 different countries of different populations of 14 women by different teams of investigators and 15 over a 30-year span by -- published over a 30- 16 or 40-year span; and almost all of them 17 indicate that there is an excess risk.</p> <p>18 Whether the individual studies are 19 statistically significant at point .05 level or 20 not is moot. It's not the important thing. 21 But putting all of that together and carrying 22 out appropriate meta-analyses shows that there 23 is incontrovertible evidence that there is a 24 strong association.</p> <p>25 Going to causality requires a few</p>	<p style="text-align: right;">Page 228</p> <p>1 description -- 2 BY MS. DAVIDSON: 3 Q. That describe an association 4 between 1.1 and 1.3 as "strong." 5 MS. PARFITT: You're referring to 6 talc articles or anything? 7 MS. DAVIDSON: I think my question 8 stands for itself, Michelle. 9 THE WITNESS: Well, I assume that 10 your question refers to anything, not just 11 talc. 12 BY MS. DAVIDSON: 13 Q. Have you ever read a publication 14 that described an association between 1.1 and 15 1.3 as, quote, "strong"? 16 MS. PARFITT: Objection. Form. 17 THE WITNESS: I can't really recall 18 because, you know, that's not how I 19 process and categorize information about 20 associations. 21 But in my report there are 22 several -- there are some examples of 23 associations that have such relative risks 24 that are well accepted as being causal and 25 there are many more.</p>
<p style="text-align: right;">Page 227</p> <p>1 more hoops to demonstrate.</p> <p>2 Q. And you have done that in your 3 report, correct?</p> <p>4 A. Yes.</p> <p>5 MS. PARFITT: All right. Give 6 me -- Jessica, if you will give me about 7 30 seconds just to make sure -- we can go 8 off real quick to see if I have any 9 further questions, and I think we'll be 10 good.</p> <p>11 MS. DAVIDSON: Sure.</p> <p>12 MS. PARFITT: Thank you.</p> <p>13 (Whereupon, a break was taken.)</p> <p>14 MS. PARFITT: Thank you. I have no 15 further questions at this time.</p> <p>16 EXAMINATION</p> <p>17 BY MS. DAVIDSON:</p> <p>18 Q. I just have a few, Dr. Siemiatycki.</p> <p>19 Can you point me to any publication 20 that refers to an association between 1.1 and 21 1.3 as, quote, "strong"?</p> <p>22 MS. PARFITT: Objection. Form.</p> <p>23 THE WITNESS: I'm sorry. Are you 24 asking me to point to publications that 25 report such associations or that</p>	<p style="text-align: right;">Page 229</p> <p>1 But having the authors or somebody 2 using the word "strong," I don't recall. 3 It would require me to have an incredible 4 memory to remember every paper I've ever 5 heard about, you know, cardiovascular 6 disease and hyperlipidemia; and, you know, 7 I just can't recall every single paper 8 I've ever seen and which words they used 9 to categorize an association.</p> <p>10 BY MS. DAVIDSON:</p> <p>11 Q. Would it surprise you to know that 12 I have looked high and low and have never been 13 able to find a published epidemiological paper 14 that uses the word "strong" to describe an 15 association in the one to two -- between in the 16 1 to 2 -- with one- to two-point estimates?</p> <p>17 MS. PARFITT: Objection. Form.</p> <p>18 THE WITNESS: Would it surprise me?</p> <p>19 No, it wouldn't surprise me.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Okay.</p> <p>22 MS. PARFITT: Wait, wait.</p> <p>23 Do you have anymore.</p> <p>24 THE WITNESS: I would start 25 probably by finding a little bit more</p>

<p style="text-align: right;">Page 230</p> <p>1 about how you did your search; but even if      2 your search was conducted in the most      3 thorough and rigorous way, it wouldn't      4 surprise me.</p> <p>5 As I indicated, I don't recall      6 every paper I've read and whether which      7 descriptors people use.</p> <p>8 BY MS. DAVIDSON:</p> <p>9 Q. Can we go back to Plaintiff's      10 Exhibit 1?</p> <p>11 MS. PARFITT: To help us out with      12 one.</p> <p>13 MS. DAVIDSON: Plaintiff's Exhibit      14 1. I believe it was page 14.</p> <p>15 MS. PARFITT: Yeah.</p> <p>16 MS. DAVIDSON: Maybe Patrick could      17 put it up since he put it up last time.</p> <p>18 Is Patrick still here?</p> <p>19 There he is. Thank you, Patrick.</p> <p>20 BY MS. DAVIDSON:</p> <p>21 Q. Ms. Parfitt read to you from      22 page 14, and at the bottom of page 14, I      23 believe it was.</p> <p>24 A. Yeah.</p> <p>25 Q. It says, "Some talc deposits in</p>	<p style="text-align: right;">Page 232</p> <p>1 MS. PARFITT: Objection. It has      2 been covered in the first deposition.</p> <p>3 MS. DAVIDSON: Michelle, you asked      4 about it in your redirect?</p> <p>5 MS. PARFITT: That is -- that is      6 fair.</p> <p>7 BY MS. DAVIDSON:</p> <p>8 Q. Are you offering such an opinion,      9 Doctor?</p> <p>10 A. Well, I'm hesitating because I      11 don't know how much to say about this. In my      12 report --</p> <p>13 Q. It's a yes-or-no question.</p> <p>14 MS. PARFITT: Wait. Let him      15 finish. He said in his report.</p> <p>16 THE WITNESS: I'm happy to give a      17 yes-or-no answer, but what is the      18 question?</p> <p>19 BY MS. DAVIDSON:</p> <p>20 Q. Are you planning to testify at      21 trial that you know the way by which talc      22 allegedly causes ovarian cancer?</p> <p>23 MS. PARFITT: Objection. Form.</p> <p>24 THE WITNESS: Do I know the way      25 it -- the way talc causes ovarian cancer</p>
<p style="text-align: right;">Page 231</p> <p>1 articles containing talc have been shown to      2 contain asbestos."</p> <p>3 Do you see that?</p> <p>4 A. I see that.</p> <p>5 Q. Does the paper specify what      6 deposits?</p> <p>7 A. I haven't read the rest of this      8 paper, so I don't know if the -- anything in      9 the paper -- this sentence doesn't specify. I      10 don't know if there's anything else in the      11 paper that would specify.</p> <p>12 Q. Does this sentence specify whether      13 they're talking about industrial talc versus      14 cosmetic talc?</p> <p>15 A. This sentence does not specify.</p> <p>16 Q. And you have no idea whether the      17 deposits and products they're talking about      18 are -- have anything to do with Johnson's Baby      19 Powder, correct?</p> <p>20 MS. PARFITT: Objection. Form.</p> <p>21 THE WITNESS: That's correct.</p> <p>22 BY MS. DAVIDSON:</p> <p>23 Q. Do you have an opinion on the      24 biological pathway by which talc causes ovarian      25 cancer allegedly?</p>	<p style="text-align: right;">Page 233</p> <p>1 is that the question?</p> <p>2 Do I know the way.</p> <p>3 BY MS. DAVIDSON:</p> <p>4 Q. Do you plan to testify at trial as      5 to how you believe talc allegedly causes      6 ovarian cancer, how, the mechanism, the      7 biological pathway?</p> <p>8 A. No, I don't -- I don't plan to      9 testify --</p> <p>10 Q. Okay.</p> <p>11 A. -- that I know the way.</p> <p>12 Q. You testified earlier that you      13 don't typically speak to public health groups.</p> <p>14 You did, however, speak to Health      15 Canada, correct?</p> <p>16 A. I spoke to a Health Canada      17 scientist.</p> <p>18 Q. Who is what the scientist?</p> <p>19 A. What is his name? Hancock.</p> <p>20 Q. Did you research his credentials?</p> <p>21 MS. PARFITT: Objection to the      22 extent --</p> <p>23 THE WITNESS: No, I didn't --</p> <p>24 MS. PARFITT: -- it was covered in      25 his '21 report.</p>

<p>1           THE WITNESS: -- research his 2           credentials.</p> <p>3 BY MS. DAVIDSON:</p> <p>4    Q. You said no?</p> <p>5    A. I didn't research his credentials.</p> <p>6    Q. Did you research the credentials of 7    any of the authors of the Health Canada paper?</p> <p>8           MS. PARFITT: Objection. Asked and 9           answered and covered in the '21 deposition.</p> <p>10          deposition.</p> <p>11          THE WITNESS: No.</p> <p>12 BY MS. DAVIDSON:</p> <p>13       Q. Are you aware that another 14      plaintiff's expert has reached out multiple 15      times to ACOG and SGO?</p> <p>16       MS. PARFITT: Objection. Form.</p> <p>17       THE WITNESS: No, I'm not aware.</p> <p>18 BY MS. DAVIDSON:</p> <p>19       Q. Have plaintiffs shared with you -- 20      plaintiff's counsel shared with you the 21      discovery that they sought from ACOG and SGO 22      about their communications with a plaintiff's 23      expert?</p> <p>24       MS. PARFITT: Objection. Form.</p> <p>25       THE WITNESS: Sorry. I didn't -- I</p>	Page 234	<p>1    colleague with a student a study of lung cancer 2    risks among women who resided in the towns of 3    Quebec where asbestos had been mined and milled 4    in order to get an idea of whether 5    environmental exposure to asbestos dust caused 6    an increase in lung cancer risk.</p> <p>7    Q. I take it none of those papers 8    related to ovarian cancer?</p> <p>9    A. No.</p> <p>10   Q. Have you ever published anything in 11   the peer-reviewed literature about asbestos and 12   ovarian cancer?</p> <p>13   A. No.</p> <p>14   MS. PARFITT: Objection. Form.</p> <p>15   Asked and answered in the '21 deposition.</p> <p>16 BY MS. DAVIDSON:</p> <p>17   Q. Did you ever consider a potential 18   association between asbestos and ovarian cancer 19   before you were hired as an expert in this 20   litigation?</p> <p>21   MS. PARFITT: Objection.</p> <p>22   THE WITNESS: Yes, I -- because I 23   was invited to participate in an IARC 24   expert panel that evaluated talc among 25   some other substances in 2006. And as a</p>	Page 236
<p>1    didn't quite understand the question.</p> <p>2 BY MS. DAVIDSON:</p> <p>3    Q. Are you aware that plaintiff's 4    counsel have subpoenaed SGO and ACOG for 5    documents related to talc?</p> <p>6    A. No.</p> <p>7       MS. PARFITT: Objection. Form.</p> <p>8 BY MS. DAVIDSON:</p> <p>9    Q. Did they share those documents with 10    you?</p> <p>11    A. No.</p> <p>12    Q. Have you ever published any paper 13    in the peer-reviewed literature about asbestos?</p> <p>14    A. Yes.</p> <p>15    Q. What was that paper?</p> <p>16    A. I think there were a few that I was 17    on. I -- I was involved as a research 18    assistant when I started out in a team that was 19    studying cancer risks among asbestos miners and 20    millers in Quebec, and I was included in as a 21    coauthor on a couple of publications that came 22    out of that. It concerned mill workers and 23    occupational exposure and lung cancer and 24    mesothelioma as the possible outcomes.</p> <p>25       I also carried out or with a</p>	Page 235	<p>1    member -- in fact, as the chairman of that 2    review committee, I had occasion to become 3    familiar with talc and ovarian cancer 4    epidemiology.</p> <p>5       MS. DAVIDSON: Let's go off the 6    record for a minute.</p> <p>7       (Discussion held off the record.)</p> <p>8       (Whereupon, a break was taken.)</p> <p>9 BY MS. DAVIDSON:</p> <p>10   Q. Dr. Siemiatycki, you testified in 11   this litigation in 2019 that the cell phone and 12   brain cancer literature is not affected by 13   recall bias.</p> <p>14       Is that still your position?</p> <p>15    THE WITNESS: Sorry?</p> <p>16    MS. PARFITT: Objection. Form.</p> <p>17    THE WITNESS: Which literature?</p> <p>18 BY MS. DAVIDSON:</p> <p>19    Q. Cell phones and brain cancer.</p> <p>20    A. Cell phones and brain cancer?</p> <p>21       MS. PARFITT: Objection. Form.</p> <p>22 BY MS. DAVIDSON:</p> <p>23    Q. You testified in 2019 that it's not 24    affected by recall bias, that literature. I'm 25    wondering if that's still your position today.</p>	Page 237

<p style="text-align: right;">Page 238</p> <p>1 A. Sorry. I'm trying to resituate my      2 thoughts.      3 So this is in a deposition about      4 talc, right, and ovarian cancer, not in a --      5 not in any litigation around cell phones; is      6 that correct?      7 Q. Were you ever in litigation around      8 cell phones?      9 A. No.      10 MS. PARFITT: Objection. Form.      11 THE WITNESS: No. That's why --      12 BY MS. DAVIDSON:      13 Q. You couldn't have testified to it,      14 right?      15 A. I don't -- at first glance, I      16 couldn't understand why I would be testifying      17 about cell phones and brain cancer in talc.      18 Okay. So can you restate the      19 question?      20 Q. What needs to be restated?      21 A. In a -- so in a deposition in --      22 Q. Dr. Siemiatycki, let me make it      23 simpler for you.      24 Do you believe that the cell phone      25 cancer literature is affected by recall bias?</p>	<p style="text-align: right;">Page 240</p> <p>1 Q. I'm fine.      2 A. Do -- are you alleging that in      3 2019 --      4 Q. I'm not alleging anything, Doctor.      5 I'm asking a question. "Alleging" I don't      6 think is a fair word.      7 A. Is the premise of your question      8 that in 2019 I stated that I believe that there      9 is recall bias in studies of cell phones and      10 brain cancer or there is not recall bias in      11 those studies?      12 What are you saying that I said at      13 the time?      14 Q. Dr. Siemiatycki, I just want to      15 know whether you currently believe that the      16 cell phone brain cancer literature is affected      17 by recall bias?      18 MS. PARFITT: Objection. Form.      19 THE WITNESS: I think it is      20 potentially affected by it, but I'm not      21 confirming or denying anything that you      22 say I said or that you're implying that I      23 said in 2019.      24 BY MS. DAVIDSON:      25 Q. Do you agree that recall bias</p>
<p style="text-align: right;">Page 239</p> <p>1 MS. PARFITT: Objection. Form.      2 THE WITNESS: I have to think about      3 that because -- for a minute because any      4 evaluation of recall bias is      5 context-specific. And so I'm trying to      6 resituate myself in the context of the      7 evidence around cell phones and brain      8 cancer.      9 And so I think there's a      10 possibility that it could be affected by      11 recall bias, yes.      12 BY MS. DAVIDSON:      13 Q. So your opinion on that has changed      14 since 2019, correct?      15 MS. PARFITT: Objection. Form. If      16 you can direct us to his prior opinion and      17 testimony, that would be helpful. Right      18 now it's a guess.      19 BY MS. DAVIDSON:      20 Q. Dr. Siemiatycki?      21 A. No. I don't understand --      22 understand the question because are you stating      23 or are you alleging that the in 2019 -- sorry.      24 Do you need to go off the record?      25 Are you okay?</p>	<p style="text-align: right;">Page 241</p> <p>1 should be assessed and evaluated when there's a      2 discrepancy between case control studies and      3 cohort studies on a specific exposure?      4 MS. PARFITT: Objection. The topic      5 of recall bias was exhaustively examined      6 in his 2021 deposition prior.      7 BY MS. DAVIDSON:      8 Q. Go ahead, Doctor.      9 MS. PARFITT: Move on.      10 BY MS. DAVIDSON:      11 Q. Go ahead, Doctor.      12 A. I think all sources of bias should      13 be considered when examining any possible      14 association.      15 MS. DAVIDSON: Okay. I have no      16 further questions.      17 MS. PARFITT: I just have one quick      18 one.      19 EXAMINATION      20 BY MS. PARFITT:      21 Q. Dr. Siemiatycki, you were asked      22 with regard to literature that you had      23 published on the topic of talc and ovarian      24 cancer. Do.      25 You remember question by counsel?</p>

1 MS. DAVIDSON: He was not. He was 2 not asked that. 3 THE WITNESS: Asbestos. 4 MS. DAVIDSON: I didn't ask that. 5 I asked about asbestos, Michelle. 6 MS. PARFITT: Oh, asbestos. 7 MS. DAVIDSON: I didn't ask about 8 talc. 9 MS. PARFITT: I have no further 10 questions. 11 MS. DAVIDSON: Great. Have a good 12 day everybody. 13 MS. PARFITT: Suzanne, we are going 14 to read and sign. Thank you. 15 MS. DAVIDSON: We just want 16 expedited, but not -- we just want 17 expedited, but not rough. We're looking 18 for expediteds, but not roughs. 19 THE COURT REPORTER: That's fine. 20 When do you need that by. 21 MS. DAVIDSON: Monday. 22 THE COURT REPORTER: Okay. Thank 23 you. 24 MS. PARFITT: We'll take one as 25 well. Thank you.	Page 242 1 CERTIFICATE 2 3 4 I, SUZANNE J. STOTZ, a Certified 5 Court Reporter, Registered Professional 6 Reporter, Certified Realtime Reporter, and 7 Notary Public in and for the State of New 8 Jersey, do hereby certify that the foregoing is 9 a true and accurate transcript of the 10 stenographic above-captioned matter. 11 12  13 14 SUZANNE J. STOTZ, CCR, RPR, CRR 15 LICENSE NO. 30XI00184500 16 17 18 DATED: March 31, 2024 19 20 21 NOTE: THE CERTIFICATE APPENDED TO THIS 22 TRANSCRIPT DOES NOT APPLY TO ANY REPRODUCTION 23 OF THE SAME BY ANY MEANS, UNLESS UNDER THE 24 DIRECT CONTROL AND/OR DIRECTION OF THE 25 CERTIFYING COURT REPORTER.
1 THE COURT REPORTER: Expedited too 2 or regular delivery, Ms. Parfitt? 3 MS. PARFITT: When you deliver 4 hers, you can deliver mine. 5 (The witness is excused.) 6 (Deposition of Jack Siemiatycki, 7 MSC, Ph.D, concluded at 5:35 p.m. EDT.) 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25	Page 243 Page 245 1 E R R A T A   S H E E T 2 I have read my testimony in the foregoing 3 transcript and believe it to be true and 4 correct to the best of my knowledge and belief 5 with the following changes: 6 PAGE   LINE   CHANGE 7 _____ 8 _____ 9 _____ 10 _____ 11 _____ 12 _____ 13 _____ 14 _____ 15 _____ 16 _____ 17 _____ 18 _____ 19 WITNESS SIGNATURE      DATE 20 21 Sworn and subscribed to before me this 22 _____ day of _____, 2024. 23 24 Notary Public of the 25 State of _____.

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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate.

The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

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